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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

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Apr 06 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
Division of Corporations

DOCUMENT # P96000045189 (3)

FAMILY HARDWARE OF CAPE CORAL, INC.

Principal Place of Business Mailing Address 622 SE 47TH TERR 622 SE 47TH TERR CAPE CORAL FL 33904 CAPE CORAL FL 33904 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/21/1996 2. Principal Place of Business 2a. Mailing Address Applied For 26 65-0673237 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name TISDALE, EDWARD W **622 SE 47TH TERR** 82 Street Address (P.O. Box Number is Not Acceptable) CAPE CORAL FL 33904 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13 DELETE Addition TITLE D 1.1 TITLE ☐ Change NAME TISDALE, EDWARD W 1.2 NAME **CR2E034** 3420 SW FIRST PLACE STREET ADDRESS 1.3 STREET ADDRESS CAPE CORAL FL 33914 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 THILE TISDALE, NANCY E 2.2 NAME NAME 3420 SW FIRST PLACE STREET ADDRESS 2.3 STREET ADDRESS CAPE CORAL FL 33914 CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Addition Change TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP CITY-ST-ZIF DELETE Change Addition TITLE 4.1 TULE 4. 2 NAME NAME 4.3 STREET ADDRESS **STREET ADDRESS** 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP Change DELETE Addition 6.t TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.