

P96000061188

Section 215.26, Florida Statutes, states in part: "Applications for refunds as provided in this section shall be filed with the Comptroller, except as otherwise provided herein, within 3 years after the right to such refund shall have accrued else such right shall be barred." Three years is generally interpreted as meaning three years from the date of payment into the State treasury. The Comptroller has delegated the authority to accept applications for refund to the unit of State government which initially collected the money.

Pursuant to the provisions of Rule 3A-44.020, Florida Administrative Code, and Section 215.26, Florida Statutes, or Section _____, Florida Statutes, I hereby apply for a refund of moneys I paid into the State treasury, which are subject to refund. The following information is submitted to substantiate the claim.

Name: Main Street Hardware, Inc. EIN or SS#: _____

Address: 1209 U.S. Highway 1
Sebastian, FL 32958

Amount: \$38.75 Date Paid 9/12/97

Reason for claim: Overpayment of amended annual report filing fee.

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Leslie Sellers

Certified true and correct this _____ day of _____, 19 _____.

Signature See attached

* Must be completed if authority is other than Section 215.26, Florida Statutes.

For Agency Use Only	
Agency recommends approval of above claim and submits the following information to substantiate the claim:	Amount of recommended refund <u>\$38.75</u>
The amount requested above was originally deposited into the State Treasury as a part of the funds deposited on	
State Treasurer's Receipt No. <u>011011-2</u>	dated <u>9/12/97</u>
Name of Account <u>4520213000145300000000010000</u>	
Statutory Authority for Collection <u>607</u>	
It is requested that payment be made from the following account:	
NAME OF ACCOUNT: <u>452021300014530000000220020000</u>	
Certified true and correct this _____ day of _____, 19 _____	
Department of State, Division of Corporations	(Agency)
	(Authorized Signature and Title)

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MAIN STREET HARDWARE, INC.
1209 U.S. HIGHWAY 1
SEBASTIAN, FLORIDA 32958
(561) 388-5585
Phone

September 9, 1997

The Secretary of State
Amended Annual Reports Div.
409 E. Gaines Street
Tallahassee, Florida 32399

P96000061188
100.00
-61.25
38.75
Amended AR

-Re: Change of Officers/Directors &
Registered Agent

Dear Sir/Madam:

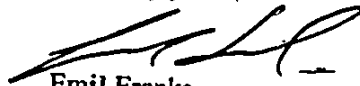
Enclosed herewith is an Amended Annual Report to be filed immediately.

I am enclosing a check in the amount of \$100.00 to cover the cost of the cost of the same. If you calculate an overpayment, please file the document and process a refund for said overpayment. If there is a deficiency please hold onto the package/document and call me collect at (561) 388-5585 and I will overnight you the correct balance.

Please send a copy of the recording to my attention at the above address.

Thanking you in advance,

Sincerely yours,



Emil Franke
General Manager

09/12/97 01101/020
38.75 refund