## 2007 FOR PROFIT CORPORATION

## Mar 29, 2007 8:00 am **Secretary of State** ANNUAL REPORT 03-29-2007 90013 011 \*\*\*150.00 **DOCUMENT #436148** 1. Entity Name HAGAN ACE HARDWARE OF HILLIARD, INC. 40043990 Principal Place of Business Mailing Address 551525 US HWY 1 1022 BLANDING BLVD. HILLIARD, FL 32046 ORANGE PARK, FL 32065 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03012007 CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 59-1484857 Not Applicable Zip \$8.75 Additional Country Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HAGAN, DONALD W Street Address (P.O. Box Number is Not Acceptable) 1022 BLANDING BLVD. ORANG PARK, FL 32065 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. \_After May 1, 2007 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. VP ADMIN TITLE ☐ Delete TITLE ☐ Change Addition Beorge E. Ruckersfeldt HAGAN, DONALD W NAME STREET ADDRESS 615896 RIVER RD 2331 STONE Bridge Dr. STREET ADDRESS CITY-ST-ZIP CALLAHAN, FL 32011 CITY-ST-ZIP brange Park, F1 32065 TITLE Delete TITLE Change Addition NAME HAMRICK, STEWART L NAME 54001 SERENDIPITY LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CALLAHAN, FL 32011 CITY-ST-ZIP TITLE ST ☐ Delete Change | ☐ Addition HAGAN, DONALD W NAME NAME STREET ADDRESS 615896 RIVER ROAD STREET ADDRESS CITY-ST-ZIP CALLAHAN, FL 32011 CITY-ST-ZIP TITLE A/ST ☐ Delete TITLE ☐ Change Addition NAME HAMRICK, STEWART L NAME 54001 SERENDIPITY LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CALLAHAN, FL 32011 CITY-ST-ZIP TITLE ☐ Defete TITLE Change ☐ Addition NAME HAGAN, ANN B NAME 35121 KAREN ROAD STREET ADDRESS STREET ADDRESS CITY-ST-71P CALLAHAN, FL 32011 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ■ Addition NAME HAGAN, DONALD G NAME STREET ADDRESS 35121 KAREN ROAD STREET ADDRESS CITY-ST-ZIP CALLAHAN, FL 32011 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

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DEFICER OR DIRECTOR

FILED