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Mar 27 1997 8:00am
Secretary of State

PROFIT CORPORATION
 ANNUAL REPORT
 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # 436148 (1)

1. Corporation Name
HAGAN ACE HARDWARE OF HILLIARD, INC.



Principal Place of Business 224 S KINGS RD PO BOX 37 HILLIARD FL 32046 US	Mailing Address 224 SOUTH KINGS RD PO BOX 37 HILLIARD FL 32046-0037 US
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3. Date Incorporated or Qualified 09/17/1973	3a. Date of Last Report 01/25/1996
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 1022 BLANDING Blvd. 27 Suite, Apt. #, etc. 28 ORANGE PARK, FL 29 32065 30 Clay	4. FEI Number 59-1484857	Applied For: <input checked="" type="checkbox"/> Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
**WALKER & KOEGLER ATTORNEYS & COUSELORS
 QUADRANT II AT SOUTHPOINT
 4655 SALISBURY RD. SUITE #390
 JACKSONVILLE FL 32258**

10. Name and Address of New Registered Agent
81 Name **Donald W. HAGAN**
82 Street Address (P.O. Box Number is Not Acceptable)
1022 BLANDING Blvd.
83
84 City **ORANGE PARK FL** **85** Zip Code **32065**

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: *Donald W. Hagan* DATE: **3/21/97**
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <input type="checkbox"/> DELETE	P HAGAN, DONALD W.	11 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	RT. 1, BOX 1615	12 NAME	
STREET ADDRESS	CALLAHAN FL	13 STREET ADDRESS	
CITY- ST- ZIP		14 CITY- ST- ZIP	
TITLE <input type="checkbox"/> DELETE	ST HAMRICK, PEGGY H	21 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	RT 4 BOX 99-A	22 NAME	
STREET ADDRESS	CALLAHAN FL	23 STREET ADDRESS	
CITY- ST- ZIP		24 CITY- ST- ZIP	
TITLE <input type="checkbox"/> DELETE	D HAMRICK, STEWART L	31 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	RT 4 BOX 99-A	32 NAME	
STREET ADDRESS	CALLAHAN FL	33 STREET ADDRESS	
CITY- ST- ZIP		34 CITY- ST- ZIP	
TITLE <input type="checkbox"/> DELETE	D HAGAN, DONALD G.	41 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	594 GLASGOW CT	42 NAME	
STREET ADDRESS	ORANGE PARK FL	43 STREET ADDRESS	
CITY- ST- ZIP		44 CITY- ST- ZIP	
TITLE <input type="checkbox"/> DELETE	D HAGAN, ANN B	51 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	594 GLASGOW CT	52 NAME	
STREET ADDRESS	ORANGE PARK FL	53 STREET ADDRESS	
CITY- ST- ZIP		54 CITY- ST- ZIP	
TITLE <input type="checkbox"/> DELETE		61 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY- ST- ZIP		64 CITY- ST- ZIP	

14. I do hereby 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.

SIGNATURE: *Donald W. Hagan* DATE: **2/20/97** (904) 272-1414
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)