## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 765705**

FILED Feb 10, 2009 Secretary of State

Entity Name: PLUMBERS & PIPEFITTERS LOCAL 123 HOLDING CORPORATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 4923 W CYPRESS ST. TAMPA, FL 33607 **Current Mailing Address: New Mailing Address:** 4923 W CYPRESS ST. TAMPA, FL 33607 FEI Number: 59-3511740 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MCINTOSH, GLENN S 4923 E CYPRESS ST. TAMPA, FL 33607 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. SIGNATURE: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete VEGA, TODD A. Name: Name: 3900 HOLLOW OAK PL Address: Address: City-St-Zip: LAND O LAKES, FL 34639 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition Name: MCINTOSH, GLENN S Name: MCINTOSH, GLENN S Address: 16326 RAMBLUM VINE DR. WEST Address: 16326 RAMBLING VINE DR. WEST City-St-Zip: TAMPA, FL 33624 City-St-Zip: TAMPA, FL 33624 Title: () Delete Title: (X) Change ( ) Addition BOATRIGHT, KARLA O'BERRY BOATRIGHT, KARLA O'BERRY Name: Name: 11030 LAKESHORE DR 11030 LAKESHORE DR Address: Address: City-St-Zip: LAND O LAKES, FL 34639 City-St-Zip: LAND O LAKES, FL 34637 ( ) Delete Title: VPT Title: VPT (X) Change ( ) Addition Name: BOOTH, GARY Name: COOK, WILLIAM 11020 CARLTON RD 18417 STERLING CIRCLE Address: Address: City-St-Zip: KATHLEEN, FL 33849 City-St-Zip: LUTZ, FL 33549

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GLENN S. MCINTOSH **FST** 02/10/2009