## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**FILED** Apr 21 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # H28072 (7) QUALITY PLUMBING OF GAINESVILLE, INC. Principal Place of Business Mailing Address 14872 SW 161 ST 14872 SW 161 ST P.O. BOX 147 P.O. BOX 147 DO NOT WRITE IN THIS SPACE **BROOKER FL 32622** BROOKER FL 32622 3. Date Incorporated or Qualified 10/30/1984 2. Principal Place of Business 1901 NW 67th Place 2a. Mailing Address 28 1901 NW 67th Place 4. FEI Number Applied For 21 59-2466644 Not Applicable Suite, Apt #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Suite #K Fee Required Suite #K City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Gainesville,  $\Box$ Trust Fund Contribution Added to Fees 28 Gainesville. 32653 Country 8. This corporation owes or has paid the current year Intangible 32653 24 25 30 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B**1 Name **ENWALL. PETER C.K.** 211 NE FIRST ST 82 Street Address (P.O. Box Number is Not Acceptable) **GAINESVILLE FL 32601** 83 84 City Zip Code 85 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) CR2E034 (10/97) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. TITLE DELETE 1 1 TITLE ☐ Change Addition NAZWORTH, ANGELA NAME 1.2 NAME 14872 SW 161 ST STREET ADDRESS 1.3 STREET ADDRESS **BROOKER FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP Addition DELETE Change TITLE 21 TITLE NAZWORTH, BRYAN 22 NAME NAME 14872 SW 161 ST STREET ADDRESS 23 STREET ADDRESS **BROOKER FL** 2 4 CITY-ST-ZIP CITY-ST-ZIP DELETE 31 TITLE Addition TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE ☐ Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CHTY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAMI 5.3 STREET ADDRESS STREET ADDRESS

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

5.4 CITY-ST-ZIP

6.4 CITY-ST-ZIP

6 1 TITLE

62 NAME **63 STREET ADDRESS** 

DELETE

Charle K. Nazworth SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

Angela K. Nazworth

4/16/98

352-377-1009

Change

\_\_\_ Addition