

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 06, 2008 8:00 am
Secretary of State

03-06-2008 90044 019 ***150.00

DOCUMENT # L05243

1. Entity Name
GENE MORTON'S PLUMBING, INC.



Principal Place of Business

170 COLLEGE DR
S-E
ORANGE PARK, FL 32065 US

Mailing Address

170 COLLEGE DR
S-E
ORANGE PARK, FL 32065 US

DO NOT WRITE IN THIS SPACE

02272008 No Chg-P CR2E034 (11/05)

4. FEI Number
59-2958682

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GENE A. MORTON
2001 PEKIN IN
MIDDLEBURG, FL 32068

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IN THIS SPACE**

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be**
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DP
NAME MORTON, GENE A.
STREET ADDRESS 170-E COLLEGE DR
CITY-ST-ZIP ORANGE PARK, FL 32065

TITLE DSTV
NAME MORTON, LINDA Y.
STREET ADDRESS 170-E COLLEGE DR
CITY-ST-ZIP ORANGE PARK, FL 32065

TITLE VP
NAME BEASLEY, BARRY L
STREET ADDRESS 170-E COLLEGE DR.
CITY-ST-ZIP ORANGE PARK, FL 32065

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

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.

SIGNATURE *Linda Y. Morton* Linda Y. Morton 2/26/08 904-272-4672
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #