

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000133593

**Entity Name:** MCCRARY'S PLUMBING OF ST. AUGUSTINE, INC.

**Current Principal Place of Business:**

1600 CR 13A N  
ST AUGUSTINE, FL 32092

**Current Mailing Address:**

1600 CR 13A N  
ST AUGUSTINE, FL 32092

**FEI Number:** 20-2060100

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MCCRARY, FRANKLIN WJR.  
1600 CR 13A N  
ST AUGUSTINE, FL 32092 US

*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

**Officer/Director Detail :**

Title PD  
Name MCCRARY, FRANKLIN WJR.  
Address 1600 CR 13A N  
City-State-Zip: ST AUGUSTINE FL 32092

Title VP  
Name MCCRARY, JENNIFER M  
Address 1600 CR 13A NORTH  
City-State-Zip: SAINT AUGUSTINE FL 32092

*I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** FRANKLIN W. MCCRARY

**PRESIDENT**

**01/29/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date