

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15000004726

Entity Name: BLACKMAN PLUMBING SUPPLY COMPANY, INC.**Current Principal Place of Business:**810 - 820 SOUTH DIXIE HWY
WEST PALM BEACH, FL 33401**Current Mailing Address:**C/O BLACKMAN
900 SYLVAN AVE.
BAYPORT, NY 11705 US**FEI Number: 11-1998427****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SMITH, YOSHIMI O. ESQ.
2101 NW CORPORATE BLVD.
SUITE 316
BOCA RATON, FL 33431 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	CP
Name	MANNHEIMER, ROBERT
Address	900 SYLVAN AVE.
City-State-Zip:	BAYPORT NY 11705
Title	D
Name	SHARMAN, JOHN
Address	10524 VANGUARD PKWY
City-State-Zip:	HUNTERSVILLE NC 28078
Title	S
Name	NARDONE, DIANE C
Address	900 SYLVAN AVE.
City-State-Zip:	BAYPORT NY 11705
Title	D
Name	KRAKOFF, DAVID
Address	4500 JENKINS WAY
City-State-Zip:	DOUGLASVILLE GA 30135

Title	S
Name	BRUM, IRVIN
Address	1425 REXCORP PLAZA EAST TOWER, 15TH FL
City-State-Zip:	UNIONDALE NY 11556-1425
Title	D
Name	MAY, LARRY
Address	106 TURNBERRY CT.
City-State-Zip:	THOMASVILLE GA 31792
Title	T
Name	O'BRIEN, JOHN
Address	900 SYLVAN AVE.
City-State-Zip:	BAYPORT NY 11705
Title	D
Name	VICK, ROBERT G JR.
Address	3420 SHERWOOD RD.
City-State-Zip:	BIRMINGHAM AL 35223

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: ROBERT MANNHEIMER**CP****01/19/2017**

Electronic Signature of Signing Officer/Director Detail

Date