2004 FOR PROFIT CORPORATION ANNUAL REPORT

ANNUAL REPORT

DOCUMENT # 223675

1. Entity Name

WILBUR PLUMBING, INC.

FILED
May 03, 2004 08:00 AN
Secretary of State

Principal Place of Business 1312 COMMERCE LANE

SUITE 1-A JUPITER, FL 33458 U Mailing Address

1312 COMMERCE LANE SUITE 1-A JUPITER, FL 33458

04292004

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-0868517 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

OLDHAM, WESLEY W. 19174 HARBOR RD N JUPITER, FL 33469

SIGNATURE: 1

WESLEY WY

OLDHAM

DO NOT WRITE IN THIS SPACE

2004

<u>561/746-7429</u>

				IN THIS STACE			
	named entity submits this statement for the prons of registered agent.	urpose of changing its registere	d office or i	registered agent, or bo	oth, in the State of Florida. I am familia	r with, and accept	
SIGNATURE_		· <u>-</u> <u>左德()</u>		<u> </u>	<u> </u>		
	Signature, typed or printed name of registered agent and title if	applicable. (NOTE, Registered	Agent signatur	e required when reinstating)	DATE	i 🔻	
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		Election Campaign Finance Trust Fund Contribution.	gnic	\$5.00 May Be Added to Fees	U00000147467 05/03/04-80108-006	i50.00	
10.	OFFICERS AND DIREC	TORS					
title name street address city-st-zip	PD OLDHAM, WESLEY W 1312 COMMERCE LANE, SUITE 1A JUPITER, FL 33458	, Si. 7				;	
TITLE NAME STREET ADDRESS CRY-ST-ZIP	VP OLDHAM, STEPHEN L 1312 COMMERCE LANE, SUITE 1A JUPITER, FL 33458		DO NOT WRITE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP THOMPSON, DENNIS J 12360 150TH COURT NORTH JUPITER, FL 33478	, ,					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GEARHART, DEBRA J 15722 89RD WAY NORTH PALM BEACH GARDENS, FL 33418			IN	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T OLDHAM, KATHRYN K 1312 COMMERCE LANE, SUITE 1A JUPITER, FL 33458						
TITLE NAME STREET ADDRESS CITY-ST-ZIP					<u></u>	<u></u>	
12. I hereby indicated of the co-	certify that the incomation supplied with this fi on this report of supplemental report is true a poration or the receiver of substee empowere , or on an attainment with an express, with al	ling does not qualify for the exe and accurate and that my signal d to execute this report as requi l other like empowered.	mption stat ture shall ha red by Cha	ed in Section 119.07(3 ave the same legal effo pter 607, Florida Statu	 i)(i), Florida Statutes. I further certify the ect as if made under oath; that I am ar stes; and that my name appears in Blo 	tat the information officer or director ck 10 or Block 11 if	

D OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR