FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

238162 **DOCUMENT #** 1. Corporation Name

(2)

EAGERTON PLUMBING CO., INC.								
Principal Place o	of Business	Mailing Address			1 100110 17800 16101 10101 11810 0111	9 [.i 41911 71911	81414 BIQ11 1881
WILLIAM T EA		WILLIAM T EAGERTO						
1093 N MCDUFF AVE JACKSONVILLE FL 32205		1093 N MCDUFF AVE JACKSONVILLE FL 32205						
PAGROCITIES	L TE GELOU	PHONODITIESE TE O	2200		3. Date theorporated or Qualified		of Last Re	
Dana and Dia	so of Duciness	De Milliag Addresse			07/02/1960 4. FEI Number	1 0	1/27/199	Applied For
2. Principal Plac	ce of Business	2a. Mailing Address 26			59-0904564		-	Not Applicable
Suite, Apt #	, elc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional
		27			5. Certificate of Status Desired		Fee F	Required
City & State		City & State			6. Election Campaign Financing			May Be
<u> </u>		28	Country		Trust Fund Contribution 8. This corporation has liability for			to Fees
Zip }	Country 25	Ζμ. 29	30			intangibie ta.	COLOG: 2	199.002.
	g Name and Address of Curren		1901		10. Name and Address of New P		igent	
			81 N	lame				
EAGERTON, HILDA J			82 S	82 Street Address (P.O. Box Number is Not Acceptable)				-
1528 BL								
JACKSO	NVILLE FL 32221		83					
			84 🤇	lity	,	FL	BS ZIE	Code
or registere familiar with	ed agent, or both, in the State of Flori r, and accept the obligations of, Sect	dai Such change was aufhor ion 607 0505, Florida Statute	ized by the corpora as:	sod a'noit.	and of directors. Thereby accept the app	ointment as	registered	agent. ram
SIGNATURE	Signature, typed or profesd han elot registeres l'agrad	act of the act discuss colors and	COLE Trouble of Agent Sc	nastate te man	ed www.peristat.cgi	DÄL		
2.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	ICERS AND	DIRECTO	RS IN 12
ITLE	VP	DELETE	1 1111.6				Change	Addition
ame	EAGERTON, DANIEL		1.2 NAME					
TREET ADDRESS	3590 JO ASHTON RD.		1.3 \$18881 AD0					
ITY-ST ZIF	ST. AUGUSTINE FL	☐ DELETE	1.4 CHY - \$1 - Z 2.1 THLF	(F		г	Change	☐ Addition
ITLE IAME	PD Eagerton, Hilda J		2.2 NAMS			L		
STREET ADDRESS	1528 BLAIR RD.		2.3 STREET ADI	DRESS				
DITY-S:-ZIP	JACKSONVILLE FL 32221		2 4 C/TY - ST - Z	1				
I TLE	S	DELETE	3 1 TITLE			Ε	Change	☐ Addition
IAME	HELMS, SAMUEL		3.2 NAME	1				
STREET ADDRESS	5560 OLIVER STREET N.		3.3 STREET AC	ORESS				
CITY-ST-ZIP	JACKSONVILLE,FL 00000		3.4 CiTV - ST - Z	NP			T 05.55	FT Addition
ITLE		DELETE	4 1 TiT.E			L	Change	Addit-on
IAME			4.2 NAME	nore:				
TREET ADORESS			43 STREET AU 44 City-St-2					
OTY-S1-ZIF OTLE		DELETE	5 1 TITLE	."		٦	Change	☐ Addition
AME			5.2 NAME			-	_	
STREET ADDRESS			5 3 STREET AD	DRESS				
DTY - ST - ZIP			5 4 CITY - S1 - 2					
TLE		DELETE	6 1 T Ti F			Ī	Change	Addition
łame			6.2 NAME					
STREET ADDRESS			6.3 STREET AD	DRESS				
CHTY - ST - ZIP		· · · · · · · · · · · · · · · · · · ·	64 CITY - ST - 2		na in ulukuula ka alaan ma	A DZIONAL EL	wide Dist	too I for the s
certify that oath; that I	the information indicated on this app	ual report or supplemental ar pration or the receiver or trus	nnual report is true : :tee empgwered to :	and accur	for the exemption stated in Section 119 are and that my signature shall have the its report as required by Chapter 607, F	same lega"	effect as i	r made under

SIGNATURE:

2 April 1996

FILED

Secretary of State

Apr 23 1996 8:00 am

904-388-0761