| PROFIT CORPORATION ANNUAL REPORT 1997 | Sandra Secre DIVISION O | PARTMENT OF STATE B. Mortham etary of State IF CORPORATIONS | Feb 05 | TLED 1997 8:00a ary of State |
|--|---|--|---|--|
| DOCUMENT # 238162 (2 EAGERTON PLUMBING CO., INC. | | | | |
| Incipal Place of Business Milliam T EAGERTON 1083 N MCDUFF AVE IACKSONVILLE FL 32205 | Mailing Address William T Eagerto 1083 N McDuff Ave Jacksonville FL 32 | | I IIIII IIIII IIII IIII IIII IIII | 3a. Date of Last Report |
| Principal Place of Business | 28. Mailing Address | | 07/02/1960 | 04/23/1996 |
| mine pair race of bas ness | 26 | | 4. FEI Number 59-0904564 | Applied For Not Applicabl |
| Suite, Apt. #, etc. | Suite, Apt #, etc. | | 5. Certificate of Status Desired | S8.75 Additional Fee Required |
| City & State | City & State | | 6. Election Campaign Financing | \$5.00 May Be |
| Zip Courtry | 28 Zip | Country | Trust Fund Contribution 8. This corporation has liability for | Added to Fees |
| 25 9. Name and Address of C | 29 | 30 | Florida Statutes | 🕻 Yes 🔲 No |
| EAGERTON, HILDA J | wirent negisteren Agent | 81 Name | 10. Name and Address of New Re | ngisterso Agent |
| JACKSONVILLE FL 32221 | | 83 | | ······ |
| Porsuant to the provisions of Sections 60 office or registered agent, or both, in the agent 1 am familiar with, and accept the SNATURE | 7 0502 and 607.1508, Florida Sta State of Florida. Such change wa obligations of, Section 607.0505, | 84 City | rporation submits this statement for the ation's board of directors. I hereby acce | FL 85 Zip Code purpose of changing its registered pt the appointment as registered |
| Pursuant to the provisions of Sections 60 office or registered agent, or both, in the agent 1 am familiar with, and accept the SNATURE Stgeated, typed expended more of register | e diagent and the if applicable 💦 🕅 | 84 City tutes, the above-named con is authorized by the corpora Florida Statutes. | uired when reinslating) | PL purpose of changing its registered pt the appointment as registered |
| Pursuant to the provisions of Sections 60 office or registered agent, or both, in the agent Lam familiar with, and accept the SNATURE Stightlice type for printed name of register OFFICER: | | 84 City tutes, the above-named cor is authorized by the corpora Florida Statutes. | | PL purpose of changing its registered pt the appointment as registered |
| Pursuant to the provisions of Sections 60 office or registered agent, or both, in the agent 1 am fam (ar with, and accept the SNATURE Stipated type of providement of region OF FICER: P EAGERTON, DANIEL SECTION, DANIEL | v diagent and the it applicable (* ISIAND DIRECTORS | 84 City Itutes, the above-named core is authorized by the corporation Florida Statutes. NOTE: Registered Agent signature required 1.1 TIFLE 1.1 TIFLE 1.2 NAME | uired when reinslating) | DATE CERS AND DIRECTORS IN 12 |
| Pursuant to the previsions of Sections 60 office or registered agent, or both, in the agent 1 am familiar with, and accept the SNATURE Stipleter typed ar proton diameted region OFFICER Figure VP EAGERTON, DANIEL 3590 JO ASHTON RD. ST. AUGUSTINE FL | v diagent and the it applicable (* ISIAND DIRECTORS | 84 City Itules, the above-named constant of the corporation of the cor | uired when reinslating) | DATE CERS AND DIRECTORS IN 12 |
| Pursuant to the provisions of Sections 60 office or registered agent, or both, in the agent 1 am familiar with, and accept the Statute typed or providinance of regions OF FICER: EVP EAGERTON, DANIEL 3590 JO ASHTON RD. ST. AUGUSTINE FL EVP | v diagent and the it applicable (* ISIAND DIRECTORS | 84 City Itutes, the above-named coras authorized by the corpora Statutes. Florida Statutes. Statutes. NOTE Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-S1-ZIP 2.1 TITLE | uired when reinslating) | DATE CERS AND DIRECTORS IN 12 |
| Pursuant to the provisions of Sections 60 office or registered agent, or both, in the agent Lam fam for with, and accept the Structure tysecter print diameted register OFFICER EAGERTON, DANIEL 3590 JO ASHTON RD. ST. AUGUSTINE FL PD EAGERTON, HILDA J 1528 BLAIR RD. | e stages' and the it applicable 0 IS AND DIRECTORS | 84 City Itutes, the above-named constant authorized by the corporation of the corporatio | uired when reinslating) | DATE CERS AND DIRECTORS IN 12 |
| Pursuant to the provisions of Sections 60 office or registered agent, or both, in the agent 1 am fam for with, and accept the Signator, type Lerpin diamond ingero OF FICER: VP EAGERTON, DANIEL 3590 JO ASHTON RD. ST-2IP EAGERTON, HILDA J Fr ADDRESS ST-ZIP ST-2DRESS ST-ZIP | e dagegi a di ute il applicable () IS AND DIRECTORS DELETE DELETE | 84 City tutes, the above-named constant of the corporation of the corp | uired when reinslating) | |
| Pursuant to the previsions of Sections 60 office or registered agent, or both, in the agent 1 am fam far with, and accept the SNATURE Signator, tractor protonance of region OFFICER E VP EAGERTON, DANIEL 3590 JO ASHTON RD. ST. AUGUSTINE FL E PD E EAGERTON, HILDA J 1528 BLAIR RD. JACKSONVILLE FL 3222 E S HELMS, SAMUEL 5560 OLIVER STREET N | e chages' a chuite d'applicable () IS AND DIRECTORS DELETE DELETE 21 DELETE I. | 84 City Itutes, the above-named consistence of the corporation of the | uired when reinslating) | |
| Pursuant to the provisions of Sections 60 office or registered agent, or both, in the agent 1 am fam far with, and accept the SNATURE Signator, typed expended name of region OFFICER: EVP EAGERTON, DANIEL 3590 JO ASHTON RD. ST-7IP E PD EAGERTON, HILDA J 1528 BLAIR RD. JACKSONVILLE FL 3222 E E E E E E E E E E E E E E E E E E | e chages' a chuite d'applicable () IS AND DIRECTORS DELETE DELETE 21 DELETE I. | 84 City Iutes, the above-named corse autorized by the corporation of t | uired when reinslating) | |
| Pursuant to the previsions of Sections 60 office or registered agent, or both, in the agent 1 am fam or with, and accept the SNATURE Stiputor, tysed or proton among of regieve OF FICER E VP EAGERTON, DANIEL 3590 JO ASHTON RD. ST-2IP E PD EAGERTON, HILDA J 1528 BLAIR RD. JACKSONVILLE FL 3222 E HELMS, SAMUEL 5560 OLIVER STREET N JACKSONVILLE, FL 00000 | e dingen and the diapplicable () IS AND DIRECTORS DELETE DELETE 21 DELETE I. O | 84 City Itutes, the above-named coras authorized by the corpora Sauthorized by the corpora Florida Statutes. NOTE Regissered Agent signarure required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - S1 - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP 4.1 TITLE 4.2 NAME | uired when reinslating) | |
| Pursuant to the provisions of Sections 60 office or registered agent, or both, in the agent 1 am fam for with, and accept the Strature type of explicit diam of register OF FICER PD EAGERTON, DANIEL 3590 JO ASHTON RD. ST-ZIP EAGERTON, HILDA J 1528 BLAIR RD. JACKSONVILLE FL 3222 S E E HELMS, SAMUEL 5560 OLIVER STREET N JACKSONVILLE, FL 00000 | e dingen and the diapplicable () IS AND DIRECTORS DELETE DELETE 21 DELETE I. O | 84 City Itutes, the above-named constant sauthorized by the corporation of the corporati | uired when reinslating) | |
| Pursuant to the provisions of Sections 60 office or registered agent, or both, in the agent 1 am fam har with, and accept the SNATURE Stiputacity and expended name of rights OF FICER: EVP EAGERTON, DANIEL 3590 JO ASHTON RD. ST-21P EAGERTON, HILDA J 1528 BLAIR RD. JACKSONVILLE FL 3222 EFT ADDRESS -ST-21P E E E E E E E E E E E E E E E E E E E | e dingen and the diapplicable () IS AND DIRECTORS DELETE DELETE 21 DELETE I. O | 84 City Itutes, the above-named constant of the corporation of the co | uired when reinslating) | |
| Pursuant to the provisions of Sections 60 office or registered agent, or both, in the agent 1 am fam far with, and accept the SNATURE Stigotoc, type://energy.com/ Energy.com/ | e dirgeri a di tito d'applicable () IS AND DIRECTORS DELETE DELETE 21 0 0 DELETE DELETE | 84 City Itutes, the above-named constant Statutes. Statutes. Statutes. NOTE Registered Agent signature requires 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 City-SI-ZiP 2.1 TITLE 2.3 STREET ADDRESS 2.4 City-SI-ZiP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 City-SI-ZiP 4.1 TITLE 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 City-SI-ZiP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 City-SI-ZiP 4.1 TITLE 5.1 TITLE 5.2 NAME | uired when reinslating) | |
| Pursuant to the provisions of Sections 60 office or registered agent, or both, in the agent 1 am fam har with, and accept the SNATURE Significal type die penilid name of region OFFICER: EN ADDRESS -ST-ZIP E PD EAGERTON, DANIEL 3590 JO ASHTON RD. ST. AUGUSTINE FL E PD EAGERTON, HILDA J 1528 BLAIR RD. JACKSONVILLE FL 3222 E S HELMS, SAMUEL 5560 OLIVER STREET N JACKSONVILLE,FL 00000 E E E ADDRESS -ST-ZIP | e dirgeri a di tito d'applicable () IS AND DIRECTORS DELETE DELETE 21 0 0 DELETE DELETE | 84 City Itutes, the above-named constant of the corporation of the co | uired when reinslating) | |
| Pursuant to the provisions of Sections 60 office or registered agent, or both, in the agent 1 am familiar with, and accept the SNATURE ENATURE | e dirgeri a di tito d'applicable () IS AND DIRECTORS DELETE DELETE 21 0 0 DELETE DELETE | 84 City Itutes, the above-named consistent of the corporation of the | uired when reinslating) | |
| Pursuant to the provisions of Sections 60 office or registered agent, or both, in the agent 1 am fam har with, and accept the SNATURE Signature typed or pented name of region OFFICER: E Signature typed or pented name of region SSO JO ASHTON RD. SSO JO ASHTON RD. ST. AUGUSTINE FL E PD E EAGERTON, HILDA J 1528 BLAIR RD. JACKSONVILLE FL 3222 E S HELMS, SAMUEL S560 OLIVER STREET N. JACKSONVILLE,FL 00000 E E E HADDRESS -ST-ZIP E E E I ADDRESS -ST-ZIP | e charger' a schutte di applicable () IS AND DIRE CTORS DELETE DELETE 21 DELETE 1. 0 DELETE DELETE DELETE DELETE DELETE | 84 City Itutes, the above-named corse autorized by the corporation of the corporatine corporation of the corporation of the co | uired when reinslating) | |
| Pursuant to the provisions of Sections 60 office or registered agent, or both, in the agent 1 am familiar with, and accept the SNATURE ENATURE | | 84 City Iutes, the above-named constant Statutes. NOTE Registered Agent signature required 13. IITLE 1.3 STREET ADDRESS 1.4 City-SI-ZiP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 City-SI-ZiP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 City-SI-ZiP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 City-SI-ZiP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 City-SI-ZiP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 City-SI-ZiP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 City-SI-ZiP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 City-SI-ZiP 6.1 City-SI-ZiP 6.1 City-SI-ZIP 6.1 <td>uired when reinslating) ADDITIONS/CHANGES TO OFFIC</td> <td></td> | uired when reinslating) ADDITIONS/CHANGES TO OFFIC | |