

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
May 05 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 283906 (6)
1. Corporation Name
DANIELS PLUMBING COMPANY, INC.



Principal Place of Business
1120 SIXTH ST S W
WINTER HAVEN FL 33880-0868

Mailing Address
1120 SIXTH ST S W
WINTER HAVEN FL 33880-3800

3. Date Incorporated or Qualified
08/04/1964

3a. Date of Last Report
02/26/1996

2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		59-1055678		Not Applicable	
22 City & State		27 City & State		5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
23 Zip		28 Zip		6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/> \$5.00 May Be Added to Fees	
24 Country		29 Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

DANIELS, CHARLES F
1120 6TH ST SW
WINTER HAVEN FL 33880

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	PTS
NAME	DANIELS, CHARLES	12 NAME	Daniels, Thomas H.
STREET ADDRESS	1120 6TH ST S.W.	13 STREET ADDRESS	1120 Sixth Street, S.W.
CITY-ST-ZIP	WINTER HAVEN FL	14 CITY-ST-ZIP	Winter Haven, Florida 33880
TITLE	SD	21 TITLE	V
NAME	DANIELS, ANNETTE M	22 NAME	Daniels, Steven B.
STREET ADDRESS	1120 6TH ST S.W.	23 STREET ADDRESS	1120 Sixth Street, S.W.
CITY-ST-ZIP	WINTER HAVEN FL	24 CITY-ST-ZIP	Winter Haven, Florida 33880
TITLE		31 TITLE	V
NAME		32 NAME	Daniels, Charles F., Jr.
STREET ADDRESS		33 STREET ADDRESS	1120 Sixth Street, S.W.
CITY-ST-ZIP		34 CITY-ST-ZIP	Winter Haven, Florida 33880
TITLE		41 TITLE	
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13, changed, or on an attachment with an address.

SIGNATURE: _____ 1/24/97 941-293-8153

CR2E034 (9/96)