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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Saridra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 **DOCUMENT #**

309119

(6)

CHY-SI-ZIP

BRANNEN & SONS PLUMBING, INC.

| Principal Place of Business Mailing Address 5936 HIGHWAY AVENUE 5936 HIGHWAY AVENUE JACKSONVILLE FL 32206 JACKSONVILLE FL 32206 | | | | | | | | | |
|--|--|---------------------------|-------------------------------|--------------------|-------------------|--|-------------------|-----------------------|---------------------|
| | | | | | | 3. Date incorporated or Qualified 09/19/1966 | 3a. Date | of Last Re 04/10/1 | eport 995 |
| 2. Principal Pia | ce of Business | 2a. Mailing Address | . Mailing Address | | | 4. FEI Number 59-1149450 | Applied For | | |
| 21 | | Suite Apt. #, etc. | Suite, Apt. #, etc. | | | \$8.75 Additional | | | Not Applicable |
| 22 | | 27 | | | | 5. Certificate of Status Desired | | | Required |
| City & State | | City & State | | | | 6. Election Campaign Financing | | | May Be |
| 7(p) Country | | 28] | Zip Country | | | Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s 199.032, | | | |
| 24 | 25 | 29 | 30 | | | Florida Statutes Pres No | | | |
| | 9. Name and Address of Curren | t Registered Agent | | | | 10. Name and Address of New i | Registered | Agent | |
| | | | | 81 | Name | | | | |
| Brannen, Kenneth a 5936 highway ave | | | | 82 | Street Addr | 9SS (P.O. Box Number is Not Acceptable) | | | |
| | SONVILLE, FLORIDA | | - | 83 | | | | | |
| 32205 | | | | | | | | | |
| | | | | 84 | City | ation submits this statement for the puriod of directors. I hereby accept the app | FL | 1 1 1 | p Code |
| SIGNATURE | - 7/ | and blicit applicable (NO | 11: Registered a | Agent | signatoro require | d when reinstating) ADDITIONS/CHANGES TO G | DATE FICERS AN | 96 DIRECTO | DRS IN 12 |
| THE | / PD | ☐ DELFTE | 1.10 | ìL E | · | | | Change | ☐ Addition |
| NAM: | BRANNEN, LYNN W. | | | 1.2 NAME | | | | | |
| STREET ADDRESS | 5922 HIGHWAY AVE | | 1.3 STI | 1.3 STREET ADDRESS | | | | | |
| CHY-ST-ZP TELE | JACKSONVILLE FL STD | [] DELETE | 1.4 CIT 2 1 THE 2 2 NAM | | - ZIP | | Change | Change | Addition |
| NAME | BRANNEN,CATHERINE C | | | | | | | change | |
| STREET ADDRESS | 5922 HIGHWAY AVE | | | 2 3 STREET ADDRESS | | | | | |
| CHY-ST-7IP | JACKSONVILLE FL | | 2,4 CiTY | | - ZIP | | | | |
| 101,1 | DDANINGAL MENNETH A | ☐ DELFTE | | 3 1 11TLE | | | | Change | ☐ Addition |
| NAMU | Brannen, Kenneth A. 5922 Highway Ave. | | 3 2 NA | | Inners- | | | | |
| STREET ADDRESS | JACKSONVILLE FL | | | | ADDRESS | | | | |
| CHY ST ZIF THEE | | ☐ DELETE | 3 4 CII | | - LIF | | | Change | Addition |
| NAM: | | - | 4 2 NA | | | | | | _ |
| STREET ADDRESS | | | 4 3 ST | REET / | ADDRESS | | | | |
| Cly-SI-ZF | | | 4 4 CI | | I-ZIP | | | | |
| THE | ☐ DELETE | | 1 | 5. 1 TOLE | | | | ☐ Change | ☐ Addition |
| NAME CANALA AL DOMOS | | | 5 2 NA | | ADDDCCC | | | | |
| STHEET ADDRESS | | | | | ADDRESS | | | | |
| CHY-S1-ZIP TITLE | | DELETE | 5 4 CI | | 1 · £IF | | | ☐ Change | Addition |
| NAME | | levent . | 6.2 NA | | Ī | | | | _ |
| STREET ADDRESS | | | | | ADORESS | | | | |

14. Lee hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 early 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 Bock 12 or Block 13 if changed, pr on an attachment with an address.

SIGNATURE:

CHAPTINE C. BRAINE C. BR

64 CITY-ST-ZIP