

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 370062

1. Entity Name

LAGASSE PLUMBING, INC.

FILED
Jan 18, 2000 8:00 am
Secretary of State

01-18-2000 90162 049 ***150.00

Principal Place of Business

Mailing Address

% DONALD G. LAGASSE
4240 DEREK WAY
SARASOTA FL 34233

% DONALD G. LAGASSE
4240 DEREK WAY
SARASOTA FL 34233-2414

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-1316357**

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LAGASSE, DONALD G
4240 DEREK WAY
SARASOTA FL 34233

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME PD
STREET ADDRESS LAGASSE, DONALD G
CITY-ST-ZIP 4240 DEREK WAY
SARASOTA, FL 0

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME VP
STREET ADDRESS MILLIGAN, WILLIAM L.
CITY-ST-ZIP 4240 DEREK WAY
SARASOTA FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME VP
STREET ADDRESS CROCKER, RICHARD D.
CITY-ST-ZIP 4240 DEREK WAY
SARASOTA FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME S
STREET ADDRESS MALLEY, DOUGLAS R.
CITY-ST-ZIP 4240 DEREK WAY
SARASOTA FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME T
STREET ADDRESS DIANE LA GASSE
CITY-ST-ZIP 4240 DEREK WAY
SARASOTA FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME ~~DAX LAGASSE~~
STREET ADDRESS ~~4142 DEERFIELD DRIVE~~
CITY-ST-ZIP ~~SARASOTA, FLORIDA 34233~~

TITLE ☐ Change ☒ Addition
NAME DAX LAGASSE
STREET ADDRESS 4142 DEERFIELD DRIVE
CITY-ST-ZIP SARASOTA, FLORIDA 34233

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with or without other like empowered.

SIGNATURE:

Donald G. Lagasse
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-10-99

941-924-8428

CR2E034 (9/99)