2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 398484

FILED
Apr 24, 2002 8:00 AM
Secretary of State

Entity Name: TROPICAL PLUMBING, INC.

Current Principal Place of Business:

P.O. BOX 905
STATE RD 559 SE OF EAGLE LAKE
EAGLE LAKE, FL 33839

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 905
STATE RD 559 SE OF EAGLE LAKE
EAGLE LAKE, FL 33839

New Mailing Address:

FEI Number: 59-1384757 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STEWART, LAWRENCE C. (JR)
659 AVE A NW
WINTER HAVEN, FL 33880 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: VD ( ) Delete
Name: MATHES, ROBERT K.,
Address: STATE RD 559 SE OF EAGLE LAKE
City-St-Zip: EAGLE LAKE, FL

Title: P ( ) Delete
Name: DAUGHTRY, WILLIAM R JR.
Address: STATE RD 559 SE OF EAGLE LAKE
City-St-Zip: EAGLE LAKE, FL 33839

Title: S ( ) Delete
Name: WINKLER, LINDA C
Address: STATE RD 559 SE OF EAGLE LAKE
City-St-Zip: EAGLE LAKE, FL 33839

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LINDA C. WINKLER S 04/24/2002

Electronic Signature of Signing Officer or Director — Date