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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

414576

(9)

ESCAMBIA PLUMBING AND HEATING CO., INC.

Principal Place of Business 1860 E ATWOOD DRIVE PENSACOLA FL 32514

STREET ADDRESS

CITY-ST-ZIP

Mailing Address

1860 E ATWOOD DRIVE PENSACOLA FL 32514 FILED
Jan 16 1998 8:00am
Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/12/1972 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-1419590 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campalgn Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zip Country 8. This corporation owes or has paid the current year Intangible 25 29 30 Personal Property Tax due June 30. ☑ Yes 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MCCULLOUGH, RICHARD F 1866 E. ATWOOD DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) PENSACOLA FL 32514 83 84 City Zip Code 85 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 Signature, typed or printed name of registered agent and title if applicab (NOTE, Registered Agent signati ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 1.1 TITLE MCCULLOUGH, LEONA 1,2 NAME CR2E034 1866 E ATWOOD STREET ADDRESS 1.3 STREET ADDRESS PENSACOLA, FL 00000 City-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 2.1 TITLE MCCULLOUGH, RICHARD 2.2 NAME 1866 E ATWOOD STREET ADDRESS 2.3 STREET ADDRESS PENSACOLA, FL 00000 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE 3,1 TITLE Change Addition 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP CITY - ST - ZIP DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP Addition TITLE DELETE 5.1 TITLE Change NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP Addition DELETE Change 6.1 TITLE TITLE NAME 6.2 NAME

14. Thereby certify that the information supplied with this filling 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 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE:

PRESIDE W 1-7-98 850-476-4520

6.3 STREET ADDRESS 6.4 CITY - ST - ZIP