98 DEC -3 AM 8: 14

SECRETARY OF STATE TALLAHASSEE, FLORIDA

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.

AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE YO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT 1998 **DOCUMENT #** 



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

430653

(6)

CULPEPPER PLUMBING, INC.

Principal Place of Business Mailing Address						7   10   10   10   10   10   10   10   1		
766 PIKE RD. 766 PIKE RD.								
WEST PALM BEACH FL 33411 WEST PALM BEACH FL 3341			3411			DO NOT WRITE IN THIS SPACE		
1						3. Date Incorporated or Qualified		
						07/16/1973		
2. Principal Place of Business 2a. Mailing Address						4. FEI Number Applied For		
	<del></del>	- · · · · · · · · · · · · · · · · · · ·			7,7,5			
21 Suite, Apt.	# ata	Suite, Apt. #, etc.				59-1485830   Not Applicable   \$8.75 Additional		
	— · · · · · · · · · · · · · · · · · · ·	е, Арс. #, ес.			5. Certificate of Status Desired Fee Required			
22			-					
						6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip	28 Country Zip C			ountry				
<u> </u>	25	29	30	<u> </u>		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30, Yes No		
24 25 29 30  9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent				
				81	Name	to, italia ana Addido o itali itagista da Aguit		
CULPEPPER, SAM D.				L				
409 N COUNTRY CLUB DR				82 Street Address (P.O. Box Number is Not Acceptable)				
ATLANTIS FL 33462				83				
				83				
				84		FL 85 Zip Code		
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 little (applicable. (NOTE. Regis					gent signatur	e required when reinstating) DATE		
12.				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITLE	PV	DELETE	1.1	TITLE		Change Addition		
NAME	CULPEPPER, SAM		1.2	NAME				
STREET ADDRESS	s 409 N COUNTRY CLUB DR 1.3		1.3 STREET ADDRESS		5000027080154			
CITY-ST-ZIP	Y-ST-ZIP ATLANTIS FL.			1.4 CITY-ST-ZIP		-12/09/9801111004		
TITLE	ST	DELETE	2.1 TITLE			****150.00 ****150.00		
NAME	CULPEPPER, SAM	LPEPPER, SAM 2.2		NAME		_ , _		
STREET ADDRESS	TOO AL COLUMNIA OLLIN DO		2.3	2.3 STREET ADDRESS				
CITY-ST-ZIP	ATLANTIO EL			2.4 CITY-ST-ZIP				
TITLE			TITLE		Change Addition			
NAME	0:41		3.2	NAME	-			
1					ADDRESS	•		

6.4 CITY-ST-ZIP 14. I hereby 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 poport 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, on on an attachment with an address.

3.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

4.3 STREET ADDRESS

5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

4.1 TITLE

4,2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

ATLANTIS FL

ATLANTIS FL

CULPEPPER, LINDA

409 N COUNTRY CLUB DR

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-Z/P

CITY-ST-ZIP

TITLE

NAME

NAME

TITLE

NAME

DELETE

DELETE

DELETE

Change

Addition

\_\_\_ Addition



(407) 478-7878 (407) 478-7885 1-800-338-7069 766 Pike Road West Palm Beach, Florida 33411

Divisions of Corporations ReInstatement Department Annual Report Filings P.O. Box 1500 Talahassee, Florida 32302-1500

**Attention: Trevor** 

## Ref: Waiver of ReInstatement Late Fee

Thank you for taking your time with me this morning. It was quite a shock to find out our Corporation papers had not been filed. We had lost our Office Manager, Bookkeeper and a Secretary all this year. With only a staff of 7 to begin with losing 3 of our staff was extremely harmful to our operation. One of the Office Managers responsibilities was to file the Corporation Papers with the State and up till the point in which you notified us we thought it was done.

We understand that it will be noted on our account that the late fee was waived and can only be used once.

Thank you for your help in this matter!!!

Sincerely,

Dottie Irwin, General Manager