## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # 439699

(0)

GORDON MILLER PLUMBING, INC.

Principal Place	e of Business	Mailing Address	<del> </del>				HILLIA FALLI HALI HALI HALI HALI HALI			
, i	1023 29TH STREET						**********	,	41411114	
1023 29TH STE ORLANDO FL 3	- <del>-</del> -	ORLANDO FL 32905-6152								
US		US				<u>_</u>		<del></del>		
						3	Date Incorporated or Qualified	1	te of Last R	eport
2. Principal P	lace of Business	2a. Mailing Address				- 4	11/13/1973 FEI Number	U4/7	22/1996	and the
21	lace of Busiliess	26				7	59-1498251			oplied For ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.								Additional
22		27				5.	Certificate of Status Desired			equired
City & State	9	City & State				6	. Election Campaign Financing		\$5.00	May Be
23		28					Trust Fund Contribution			to Fees
Zφ	Zip Country Zip			ntry		6.	This corporation has liability for i			. 199.032,
24	[25]	29	30					Yes [		
	9. Name and Address of Currer	it Registered Agent		041	Name	10	). Name and Address of New Re	gistered /	igent	
	ER, CHARLES G.			81	Name					
	KOGER ST.		Ì	82	Street A	ddress (	P.O. Box Number is Not Acceptab	le)		
	ANDO, FL		}	83	<del></del>				<del></del>	
3281	12			83						
			Ì	84	City				<b>85</b> Zip (	Code
11. Purcuant	to the provisions of Sections 607 050	2 and 607 1508. Florida State	tac the et		nomed o	ornorati	on submits this statement for the n	FL	changing it	to reciptored
office or r	to the provisions of Sections 607,050 egistered agent, or both, in the State m familiar with, and accept the obligi	of Florida. Such change was	authorized	d by	the corpo	nation's	board of directors. I hereby accep	t the app	ointment as	registered
	m tamiliar with, and accept the obligi	ations of, Section 607.0505, F								
SIGNATURE	Signature, typed or painted name of registered age		TE Registered					DATE	<del></del>	
12.	OFFICERS AN		13.				ADDITIONS/CHANGES TO OFFIC		DIRECTOR	1S IN 12
TITLE	PTD	DELETE	1,1 1()	TLE.					Change	Addition
NAME	MILLER, CHARLES G		1.2 NA	ME	1					
STREET ADDRESS	4444 KOGER STREET		1.3 ST	REET A	ADDRESS					
CITY-ST-ZIP	ORLANDO, FL 00000		1.4 CI	TY-ST	- ZIP					
TITLE	VSD	DELETE	2.1 10	TLE.					Change	Addition
NAME	HANSEN, CHARLES E		2.2 NA	ME	1		•			
STREET ADDRESS	3830 ALVERADO ST		2.3 ST	REET	ADDRESS					
CITY-ST-ZIP	ORLANDO, FL 00000	OF LETT	2. 4 CI		I - ZIP					
TITLE	P	DELETE	3.1 111		1		· · ·		☐ Change	Addition
NAME	MILLER, CHARLES G.		3.2 NA							
STREET ADDRESS	4444 KOGER ST.				ADDRESS					
CITY-ST-ZIP TITLE	ORLANDO, FL 00000	DELETE	3.4. CI 4.1 T()		I - ZIP				Change	Addition
NAME			4.1 111 4. 2 N/						TT DIRECT	CT VOORGOU
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP			4.4 CI		1					
TITLE		☐ DELETE	5.1 TII	_	- ZIF				Change	Addition
NAME			5.2 NA							
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP			5.4 CI							
TITLE		☐ DELETE	6.1 T()					· ·····	Change	Addition
NAME			6 2 NA						. •	
STREET ADORESS					ADDRESS					
CITY-ST-ZIP		_	6.4 CI	IY - ST	-7IP		•			
14. I do heret	by certify that the information supplier in indicated on this annual report or s flicer or director of the corporation of in Block 12 or Block 13 if changed.	d with this fling does not qua	lify for the	exen	nption sta	ted in S	section 119.07(3)(i), Florida Statutes	s. I further	certify that	the
l am an o	flicer or director of the corporation of	The receiver or trustee embo	wered to e	xect	iale and t Ite this re	portas r	signature shall have the same lega required by Chapter 607, Florida S	i eirect as tatutes; ar	ii made uni nd that my r	uer oath; that name
appears i	n Block 12 or Block 13 if changed, 🌬	r on an/a∕tachmen <b>i/i/i</b> n a∕/ ac	ddræss.//			-				

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME

**FILED** 

Feb 03 1997 8:00am

Secretary of State