

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**May 04, 2006 8:00 am**  
**Secretary of State**

05-04-2006 90247 027 \*\*\*150.00

**DOCUMENT # 484768**

1. Entity Name

MANASOTA PLUMBING AND HARDWARE SUPPLY, INC.



Principal Place of Business

6008 15TH ST. E. (BRADENTON, FL 34202  
P O BOX 1393  
ONECO FL 34264  
US

Mailing Address

6008 15TH ST. E. (BRADENTON, FL 34202  
P O BOX 1393  
ONECO FL 34264  
US



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

59-1620090

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

1st MOORE

CR2E034 (10/05)

6. Name and Address of Current Registered Agent

CHAMNESS, RICHARD E  
6339 5TH ST CIR E  
BRADENTON FL 34203

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2006 Fee Will Be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD  
NAME CHAMNESS, RICHARD E  
STREET ADDRESS ~~1607 ZIPPERER ROAD~~ 6339 5th St. Cir. E  
CITY-ST-ZIP BRADENTON FL 34203 34203

TITLE D  
NAME CHAMNESS, EUGENE  
STREET ADDRESS 704 63RD AVENUE EAST  
CITY-ST-ZIP BRADENTON FL 34203

TITLE ST  
NAME CHAMNESS, RICHARD E  
STREET ADDRESS ~~1607 ZIPPERER RD.~~ 6339 5th St. Cir. E  
CITY-ST-ZIP BRADENTON FL 34203 34203

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE  
NAME  
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CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Richard Chamness* Richard Chamness

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/25/06 941-755-0367