

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2005 08:00 AM
Secretary of State

DOCUMENT # 551965

1. Entity Name
JIM MANGRUM PLUMBING COMPANY, INC.



Principal Place of Business

**4722 WESCONNETT BLVD
JACKSONVILLE, FL 32210 US**

Mailing Address

**4722 WESCONNETT BLVD
JACKSONVILLE, FL 32210 US**

DO NOT WRITE IN THIS SPACE



01062005 No Chg-P CR2E034 (10/03)

4. FEI Number
59-1783930

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**LEPRELL, SAMUEL L
1930 SAN MARCO BLVD #201
(ST MARKS PLACE)
JACKSONVILLE, FL 32207**

**DO NOT WRITE
IN THIS SPACE**

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, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PD
MANGRUM, KENNETH J
5543 VISTA VERDE ST
JACKSONVILLE, FL 32244**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VP
ALLEN, RICKY J
8138 CORKY LANE
JACKSONVILLE, FL 32244**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**ST
HANCOCK, REBECCA A
5522 RAINEY AVE W
ORANGE PARK, FL 32065**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

1100000175004
01/10/05-80031-023 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Rebecca A. Hancock (REBECCA A. HANCOCK) 01-06-05 (904) 772-0428

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

SECRETARY-TREASURER