

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 11, 2004 8:00 am
Secretary of State

03-11-2004 90015 023 ***150.00

DOCUMENT # 552377

1. Entity Name
IRELAND PLUMBING, INC.



Principal Place of Business

**21 LIME STREET
ENGLEWOOD, FL 34223**

Mailing Address

**21 LIME STREET
ENGLEWOOD, FL 34223**

DO NOT WRITE IN THIS SPACE

01282004 No Chg-P CR2E034 (10/03)

4. FEI Number

59-1781335

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**MEISER, TERRY L
21 LIME STREET
ENGLEWOOD, FL 34223**

**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, 2004 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
**D
IRELAND, LARRY E.
21 LIME STREET
ENGLEWOOD, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
MEISER, TERRY L
21 LIME ST.
ENGLEWOOD, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD
MEISER, TRISHA A
21 LIME ST.
ENGLEWOOD, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**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)(i), 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:

Terry L Meiser **TERRY L MEISER**

Date

Daytime Phone #

2-09-04 474-6265