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2077

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mornum
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 17 PM 3:29

DOCUMENT # 606826

(6)

1. Corporation Name

MODERN PLUMBING INDUSTRIES, INC.

Principal Place of Business

255 OLD SANFORD-OVIEDO ROAD
WINTER SPRINGS FL 32708

Mailing Address

255 OLD SANFORD-OVIEDO ROAD
WINTER SPRINGS FL 32708

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

01/16/1979

3a. Date of Last Report

01/28/1994

4. FEI Number

59-1894437

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☒ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt., #, etc.

Suite, Apt., #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BRACCO, FRANK J
621 MORGAN STREET
WINTER SPRINGS FL 32708

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

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 title if applicable)

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

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

PD

1.2 NAME

BRACCO, FRANK J

1.3 STREET ADDRESS

255 OLD SANFORD-OVIEDO

1.4 CITY-STATE-ZIP

WINTER SPRGS FL

2.1 TITLE

VP

2.2 NAME

TRUHE, JOHN

2.3 STREET ADDRESS

255 OLD SANFORD-OVIEDO

2.4 CITY-STATE-ZIP

WINTER SPRGS FL

3.1 TITLE

ST

3.2 NAME

VECCHIOLLA, LEONIDES

3.3 STREET ADDRESS

255 OLD SANFORD-OVIEDO

3.4 CITY-STATE-ZIP

WINTER SPRINGS FL

4.1 TITLE

ST

4.2 NAME

BRACCO, SHERRIL

4.3 STREET ADDRESS

255 OLD SANFORD-OVIEDO

4.4 CITY-STATE-ZIP

WINTER SPRINGS FL

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 liquidator 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, or as an attachment with or without a fee.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR

Date

Signature (Printed Name)