FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

674460

(1)

1. Corporation	MENT # 6744(Name TO BAY PLUMBING, INC.	` '			
Principal Place	of Business	Mailing Address		1 1001119 011111 10734 01011 01013 61111	#### #################################
6079 CLARK CENTER AVENUE 6079 CLARK CENTER SARASOTA FL 34238 SARASOTA FL 34238			AVENUE		
				3. Date Incorporated or Qualified 07/01/1980	3a. Date of Last Report 01/27/1995
2. Principal Pla	ce of Business	2a. Mailing Address		4, FEI Number 59-2006115	Applied For Not Applicable
		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
27			5. Gertincate of Status Desired	Fee Required	
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23 Zip	Country	Zip	Country	8. This corporation has liability for in	
24	25	29	30	Florida Statutes	
	g. Name and Address of Curr	ent Registered Agent	81 Name	10. Name and Address of New R	egistered Agent
HALL, KENNETH E					
6079 CLARK CENTER AVENUE SARASOTA FL 34238			82 Street Add	dress (P.O. Box Norther is Not Acceptable	
			83		
			84 City		B5 Zip Code
tamiliar wit	h, and accept the obligations of, Se Signature, typed or printed name of registered as	ent and title of applicable (N	red by the corporation's bo. S. OTE: Registered Again suprature requi		DATE
12.		AND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12 Change Addition
TITLE	PD Hall, Kenneth e		1.2 NAME		El augusta El vigarios.
NAME STREET ADDRESS	5001 BLISS RD		1.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA, FL 33582		1.4 CITY - ST - ZIP		
TITLE	ST	☐ DELETE	2 1 TITLE		Change Addition
NAME	HALL, MARY JANET 5001 BLISS RD		2 2 NAME		
STREET ADDRESS	SARASOTA, FL 33582		2 3 STREET ADDRESS 2 4 CITY - ST - ZIP		
CITY-ST-ZIP TITLE	0,48001,412,0002	☐ DELETE	3 1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CHY-ST-ZIP		DELETE	3.4 C/TY - ST - 74P 4. 1 TITLE		Change Addition
TITLE NAME			4.1 TIMEE 4.2 NAME		الله الله الله الله الله الله الله الله
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-S1-ZIP			4.4 CHY-ST ZIP		
TITLE		☐ DELETE	5 1 Tills E		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5 3 STREET ADORESS		
CITY-ST-ZIP		DELETE	5 4 CHY-\$1-74P 6 1 THLE		Change Addition
TITLE NAME		Ditteri	6 2 NAME		
STREET ADDRESS			63 STREET ADDRESS		
City, St. 7IP			6.4 C/TY-S1-7/P		
	by certify that the information supplied the information information in costs on this of	ed with this filing is voluntarily fur	wiched and door not qualify	for the exemption stated in Section 119 rate and that my signature shall have the	.07(3)(k), Florida Statutes. I further same legal effect as if made under
oath; that appears ir	I am an officer or director of the con Block 12 or Block 13 if changed,	rporation or the receiver or trust or on an adachment with an ada	ee empowered to execute to dress.	rate and that my signature shall have the his report as required by Chapter 607. Fi	orida Statutes; and that my name

SIGNATURE: SIGNING OFFICER OR DIRECTOR 1-17-94 941-921-4191