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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sanara B. Morthan:

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # 6880 1. Corporation Name KELLEY PLUMBING, INC.	057 (9)			
NELLET I EDMINIA, MO.				
Principal Place of Business	Mailing Address			IODI QIBY BIBII BIQII BIQIF QEDII QIQII 1861
910 HARBOR LAKE CT	910 HARBOR LAKE CT			
SAFETY HARBOR FL 34695	SAFETY HARBOR FL 3	4695		
			3. Date Incorporated or Qualified 09/17/1980	3a. Date of Last Report 04/11/1995
2. Principal Place of Business	2a, Mailing Address		4, FE) Number	Applied For
21	26		59-2027264	Not Applicable
Suite, Apt. #, etc.	Suite: Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23	28	r · · · · · · · · · · · · · · · · · · ·	Trust Fund Contribution	Added to Fees
Zip Gountry 25	Zφ	Country	This corporation has liability for i Florida Statutes	ntangible tax under s. 199.032,
9, Name and Address of Co	[29] urrent Registered Agent	[30]	10. Name and Address of New R	
	T T	81 Name a	LOBERT P. KUL	
KELLEY, MATTHEW W.		82 Street Add	ress (P.O. Box Number is Not Acceptab	le)
910 HARBOR LAKE COURT		L L	O HARBOR LAKE	CT.
SAFTEY HARBOR 34695		83		
		84 Oity	Somethers of	85 Zip Code
11. Pursuant to the provisions of Sections 607.	.0502 and 607.1508, Florida Statutes	s, the above harned corpo	ration submits this statement for the pur	pose of changing its registered office
or registered agent, or both, in the State of	Florida, Such change was authorize Section 607.0505, Florida Statutes.	J by the corporation's bloa	ird of directors. Thereby abcept the appo	pintment as registered agent. Lam
SIGNATURE XXXIII	eller ROBERT	P. Kelley,	VICE PRESIDENT	4/23/96
12. OF FIGERS	CANO DIRECTORS	F. Beste personnell of 2 Justine Related	stwierterstittig	Esti
TITLE PO	MELETE	13. 11150 V	ADDITIONS/CHANGES TO OFFI	CFRS AND DIRECTORS IN 12 TO Change Addition Addition TO Change Addition Addition Addition Addition Addition Addition
NAME KELLEY, MATTHEW W	<i>p.</i> 4 ·····	12 NAME	OBERT P. KELLEY	. 4
STREET ADDRESS 3256 NICKS PL	DECEASED	13 STHE LADDRESS 76	OBERT P. KELLEY	WTH S
CITY-ST-ZIF CLEARWATER, FL 00000	0	1.4.CHY ST-ZIP	T. PETERSBURG FI	_ <i>337</i> 07 🖫
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NAME		2.2 NAME		
STREET ADDRESS		2.3 STRE TADDRESS		
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STREEL ADDRESS		3.2 NAMI		
City-St-ZiF		3.3 STRELL ADDRESS 3.4 CITY ST ZIP		ļ
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NAME		4 2 NAME		
STREET ADDRESS		4.3 STHE TIADDRESS		
CITY - ST - ZIP		44 CITY ST-ZIP		
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NAME		5.2 NAME		
STREET ADDRESS		5.3 STRE TIADDRESS		
CITY-ST-ZIP	FD DC. LV.	5.4 CHY ST-ZIP		
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NAME		6.2 NAMI		
STREET ADDRESS		6.3 STRE T ADDRESS		
CITY ST ZIP	alice with the floor is valuated. for	tood and do so not outlitud	for the avecaution stated in Cost and 110	OZIONIA FIA II- ONA ATT I FINIT

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes if further certify that the information inclicated 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 frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 treatment of the corporation with an address

THE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

4/23/96 (813) 725-2588