

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 706259

FILED
Apr 21, 2009
Secretary of State

Entity Name: HILLSBOROUGH ASSOCIATION OF PLUMBING - HEATING - COOLING CONTRACTORS, INC.

Current Principal Place of Business:

1803 BAYSHORE DR.
TERRA CEIA ISLAND, FL 34250 US

New Principal Place of Business:

Current Mailing Address:

1803 BAYSHORE DR.
PO BOX 227
TERRA CEIA ISLAND, FL 34250 US

New Mailing Address:

FEI Number: 59-1100863 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

WHAITES, MARK
6907 SOUTH HIMES AVE.
TAMPA, FL 33611 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: WHAITES, MARK
Address: 6907 SOUTH HIMES AVE
City-St-Zip: TAMPA, FL 33611

Title: PE () Delete
Name: HERTENSTEIN, KEVIN
Address: 8414 N 40TH STREET
City-St-Zip: TAMPA, FL 33604

Title: S () Delete
Name: MCLAIN, THOMAS
Address: 2403 E. 4TH AVE..
City-St-Zip: TAMPA, FL 33605

Title: D () Delete
Name: SAMPLE, STEWART
Address: 4103 SAN RAFAEL ST.
City-St-Zip: TAMPA, FL 33629

Title: T () Delete
Name: HERO, KENT C
Address: 118-W. PALM AVE.
City-St-Zip: TAMPA, FL 33602

Title: D () Delete
Name: GRECO, JAMES C
Address: 121 CENTRAL DR.
City-St-Zip: BRANSON, FL 33510

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: GRECO, JAMES C
Address: 121 CENTRAL DR.
City-St-Zip: BRANDON, FL 33510

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARK WHAITES

PRES

04/21/2009

Electronic Signature of Signing Officer or Director

Date