## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 01 1997 8:00am

Secretary of State

Daytime Phone # 0036457

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

719705

**(6)** 

## PLUMBERS AND PIPE FITTERS LOCAL UNION NO. 719 HO LDING COMPANY, INC.

Principal Place of Business Mailing Address										
NO 719 HOLDING COMPANY INC NO 719 HOLDING COMPANY INC										
2502 S ANDRE			2502 S ANDREWS AVE							
FORT LAUDER	RDALE FL 33316	FORT LAUDE	FORT LAUDERDALE FL 33316-3964			3. Date Incorporated or Qualified 11/17/1970	3a. Date of La 03/22	ast Report 2/1996		
2. Principal F	Place of Business	2a. Mailing A	2a. Mailing Address			4. FEI Number	<del>'                                    </del>	Applied For		
21		26	26			<b>59-0442562</b> Not Applicable				
Suite, Apl	. #, etc.	<u></u>	Suite, Apt. #, etc.			5. Certificate of Status Desired	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	75 Additional se Required		
City & Sta	to .	27     City & St	ate			& Floation Compaign Figure 19				
23		28	aro			Election Campaign Financing     Trust Fund Contribution		.00 May Be ded to Fees		
Zip	Country	Zip		Countr	у	8. This corporation has liability for i				
24	25	29		30			Yes 🕱 No			
	9. Name and Address of	<b>Current Registered Age</b>	ent		·	10. Name and Address of New Re	gistered Agent			
				81	Name					
	r, robert M			82	Street	Address (P.O. Box Number is Not Acceptab	le)			
2502 SOUTH ANDRES AVENUE (BUSINESS)				100				· · · · · · · · · · · · · · · · · · ·		
	auderdale, fl			83	'					
33316				64	City		FL 85	Zip Code		
11 Purpuant	t to the provisions of Sections 6	\$17.0502 and 617.1508.6	Florida Statute	e the abou	la-named	corneration submits this statement for the r		ing its registered		
office or	registered agent, or both, in th	e State of Florida. Such o	change was e	uthorized b	y the corp	corporation submits this statement for the p coration's board of directors. I hereby accep	ot the appointmen	nt as registered		
		e obligations of, Section	617.0503, FID	rida Statute	15.					
SIGNATURE	Signature, typed or printed name of regit	stored agent and title if applicable.	(NOTE	: Registered A	ent signature	regulard when reinstaling)	DATE			
12.		RS AND DIRECTORS		13.	<del></del>	ADDITIONS/CHANGES TO OFFICE	ERS AND DIREC	CTORS IN 12		
TITLE	VD		DELETE	1.1 TITLE		VD	Cha	inge Addition		
NAMÉ	PETRIE, JOSEPH B			1.2 NAME		PETRIE, JOSEPH B.				
STREET ADDRESS	1432 N W THIRD AVE			1.3 STREE	T ADDRESS	309 NW 3 <b>0</b> Court				
CITY - ST - ZIP	FT LAUD, FL 33311			1.4 CITY-	ST-ZIP	Ft Lauderdale, Fl 33	311			
TITLE	PD		DELETE	2.1 TITLE			☐ Cha	inge 🔲 Addition		
NAME	WITZ, ROBERT L			2.2 NAME						
STREET ADDRESS		NUE, #3		2 3 STREE	T ADDRESS					
CITY-ST-ZIP	SUNRISE FL		I priette	2.4 CITY	ST-ZIP		F-1 65			
TITLE	SD BODEST II	L	DELETE	3.1 TITLE			☐ Cha	ange Addition		
NAME	CALDER, ROBERT M			3.2 NAME						
STREET ADDRESS				1	T ADDRESS					
CITY-ST-ZIP TITLE	FT. LAUDERDALE FL	Т	DELETE	3.4. CITY-	-SI-ZIP		Cha	ange Addition		
NAME				4. 2 NAME	:		_ 01×	- I Mowoll		
STREET ADDRESS					T ADDRESS					
CITY-ST-ZIP				4.4 CITY-						
TITLE			DELETE	5.1 TITLE	91-£II		Cha	nge Addition		
NAME		_		5.2 NAME			<del></del>			
STREET ADDRESS					T ADDRESS					
CITY-ST-ZIP				5.4 CITY-		**				
TITLE			DELETE	6.1 TITLE			☐ Cha	ange Addition		
NAME				6.2 NAME		**				
STREET ADDRESS				6.3 STAEE	T ADDRESS	·				
CITY-ST-ZIP				6.4 CITY-	ST-ZIP					
14. I do here	eby certify that the information	supplied with this filing d	oes not qualif	y for the ex	emption s	tated in Section 119.07(3)(I), Florida Statute that my signature shall have the same lega	s. I further certify	that the		
l am an -	officer or director of the corpor	ation or the receiver or tr	ustee empow	ered to exe	cute this	report as required by Chapter 617, Florida S	Statutes; and that	my name		
appears	in Block 12 or Block 13 if char	nged, or on an attachmer	nt with an add	iress.		/ /				