2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

Albert Kuehn Signature and typed on printed name of signing officer on director

FILED **DOCUMENT # 732288** Feb 03, 2000 8:00 am 1. Entity Name Secretary of State FLORIDA ASSOCIATION OF PLUMBING, HEATING AND COO 02-03-2000 90034 038 ****61.25 Principal Place of Business Mailing Address 300 N.W. 25TH STREET 300 N.W. 25TH STREET WILTON MANORS FL 33311-3007 WILTON MANORS FL 33311 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For 51-0185548 Not Applicable Zip Country \$8.75 Additional Country Zip 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) HADLEY, MICHAEL W 300 N.W. 25TH STREET WILTON MANORS FL 33311 Zip Code 8. 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. 55 3 3 50 1117 176 SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees **Department of State FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Delete TITLE Change * Addition TITLE D NAME NAME FRITZ, DONALD A O'Brien, Robert STREET ADDRESS STREET ADDRESS 10863 N.W. 50TH STREET 181 NE 32nd Street CITY-ST-ZIP CITY-ST-ZIP SUNRISE FL 33351 Ft Lauderdale, FL 33334 Delete TITLE ☐ Change Addition X TITL F D NAME NAME MURRAY, PATRICK Carpenter, John STREET ADDRESS STREET ADDRESS 1134 S.W. 1ST WAY 1516 NW 58th Avenue CITY-ST-ZiP-City-St-7IP-DEERFIELD BEACH FL 33441 Margate, FL 33063 ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME KUEHN, ALBERT STREET ADDRESS STREET ADDRESS 328 N OCEAN BLD #508 CITY-ST-ZIP CITY-ST-7IP POMPANO BEACH FL Change v / s Addition Delete TITLE TITLE NAME HOSBACH, ED NAME Hosbach, Ed STREET ADDRESS STREET ADDRESS 1331 S. DIXIE HWY. W #8 1331 S Dixie Hwy. W #8 CITY-ST-7IP CITY-ST-ZIP POMPANO BEACH FL 33060 Pompano Beach, FL 33060 Change ☐ Addition TITLE Delete TITLE NAME NAME CLINE, DANIEL Cline, Daniel STREET ADDRESS STREET ADDRESS 1058 NE 43 CT 1058 NE 43rd Court CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL 33334 Ft-Lauderdale. FL 33334 Delete TITLE ☐ Change ☐ Addition TITLE DODD, JOHN NAME STREET ADDRESS STREET ADDRESS 175 SE 2 AVE CITY-ST-ZIP CITY-ST-ZIP LIGHTHOUSE POINT FL 33064 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if

Daytime Phone #