

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 28, 2003 8:00 am**  
**Secretary of State**

04-28-2003 91378 026 \*\*\*150.00

**DOCUMENT # 849085**

1. Entity Name  
**MECHANICAL PIPING CONTRACTORS, INC.**



Principal Place of Business  
**3750 HALLS MILL ROAD  
MOBILE AL 36693  
US**

Mailing Address  
**P O BOX 5443  
MOBILE AL 36605  
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **63-0698050**

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**NIXON, TARY L.  
224 E. INTENDENCIA ST.  
PENSACOLA FL 32501**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2003 Fee will be \$550.00  
Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☒ Delete  
NAME **JONES, J. R., III**  
STREET ADDRESS **2105 RYEGATE COURT**  
CITY-ST-ZIP **MOBILE AL**

TITLE **P** ☐ Change ☒ Addition  
NAME **Charles M. Greene**  
STREET ADDRESS **3750 Halls Mill Road**  
CITY-ST-ZIP **Mobile, AL 36693**

TITLE **S** ☒ Delete  
NAME **JONES, ELAINE K.**  
STREET ADDRESS **2105 RYEGATE COURT**  
CITY-ST-ZIP **MOBILE AL**

TITLE **S** ☐ Change ☒ Addition  
NAME **Charles M. Greene**  
STREET ADDRESS **3750 Halls Mill Road**  
CITY-ST-ZIP **Mobile, AL 36693**

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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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** *Charles M. Greene* **REQUIRED** **Charles M. Greene President** **4/24/03 251-666-1450**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)