


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Jan 16 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 851533 (0)

1. Corporation Name

FRANKENMUTH PLUMBING & HEATING, INC.



Principal Place of Business	Mailing Address
17281 ALICO CENTER RD SUITE #2 FT MYERS FL 33912 US	17281 ALICO CENTER RD SUITE #2 FT MYERS FL 33912-6019 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	4. FEI Number	Applied For
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	01/09/1982	38-1908827	Not Applicable
22 City & State	27 City & State	5. Certificate of Status Desired	6. Election Campaign Financing	\$8.75 Additional Fee Required
23 Zip	28 Zip	<input type="checkbox"/>	Trust Fund Contribution	\$5.00 May Be Added to Fees
24 Country	29 Country	30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SHORT, DONALD G.
2213 ANDREA LN / SUITE 107
FORT MYERS FL 33912

81 Name	82 Street Address (P.O. Box Number is Not Acceptable)	83	84 City	85 Zip Code
	17281 ALICO CENTER RD SUITE #2		FT. MYERS	FL 33912

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE VP NAME CLEMONS, WILLIAM STREET ADDRESS 17281-2 ALICO CENTER RD CITY-ST-ZIP FT MYERS FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP
TITLE PTD NAME SHORT, DONALD G STREET ADDRESS 2213 ANDREA LN. SUITE 107 CITY-ST-ZIP FT MYERS, FL 00000	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 17281 ALICO CENTER RD #2 2.4 CITY-ST-ZIP FT. MYERS, FL 33912
TITLE SV NAME SHORT, MARK STREET ADDRESS 7660 MEILKE RD CITY-ST-ZIP FREELAND MI 00000	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP
TITLE V NAME STILWELL, WILLIAM G STREET ADDRESS 4776 PINE LK RD SE CITY-ST-ZIP BONITA SPRINGS, FL 00000	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. 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 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: DONALD G. SHORT

1-8-97 941.433-1544

CR2E034 (10/97)