

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 07, 2003 8:00 am
Secretary of State

03-07-2003 90090 004 ***150.00

DOCUMENT # F45666

1. Entity Name
GARVEY PLUMBING, INC.



Principal Place of Business
**11496 PIERSON RD
C13
WELLINGTON FL 33414
US**

Mailing Address
**11496 PIERSON RD
C13
WELLINGTON FL 33414
US**



2. Principal Place of Business

3. Mailing Address

GARVEY Plumbing, Inc.

GARVEY Plumbing, Inc.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1426-B Skies Rd

1426-B Skies Rd

City & State

City & State

West Palm Beach, FL

West Palm Beach, FL

Zip

Country

Zip

Country

33411

USA

33411

USA

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-2140833**

Applied For
Not Applicable

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

**GARVEY, JOHN R.
12896 54TH STREET N.
WEST PALM BEACH FL 33411**

Name **GARVEY, JOHN R.**
Street Address (P.O. Box Number is Not Acceptable)
3038 SW Cedar Trail

City **Palm City** **FL** Zip Code **34990**

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

JOHN R. GARVEY

3/4/03

(NOTE: Registered Agent signature required when reinstating)

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 **PSD** ☒ Delete
NAME **GARVEY, JOHN R.**
STREET ADDRESS **12896 54TH ST. N.**
CITY-ST-ZIP **ROYAL PALM BEACH FL**

TITLE **PSD** ☒ Change ☐ Addition
NAME **GARVEY, JOHN R.**
STREET ADDRESS **3038 SW Cedar Trail**
CITY-ST-ZIP **Palm City, FL 34990**

TITLE **V** ☐ Delete
NAME **GARVEY, SALLIE C**
STREET ADDRESS **12896 54TH ST N**
CITY-ST-ZIP **ROYAL PALM BEACH FL**

TITLE **V** ☒ Change ☐ Addition
NAME **GARVEY, SALLIE C.**
STREET ADDRESS **3038 SW Cedar Trail**
CITY-ST-ZIP **Palm City, FL 34990**

TITLE **V** ☐ Delete
NAME **DUNCAN, MICHAEL**
STREET ADDRESS **775 SNEAD CIRCLE**
CITY-ST-ZIP **WEST PALM BEACH FL 33413**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
NAME
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CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/4/03

561 242 5060

CR2E034 (10/02)