

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

FILED

May 22 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 # **G55373** (6)
1. Corporation Name
BUDDY LOWE PLUMBING, INC.



Principal Place of Business 6971 PROCTOR RD SARASOTA FL 34241 US	Mailing Address 6971 PROCTOR RD SARASOTA FL 34241 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 4800 SUNDAY COURT Suite, Apt. #, etc. 22 City & State 23 SARASOTA FL Zip 24 34235-2250		2a. Mailing Address 26 4800 SUNDAY COURT Suite, Apt. #, etc. 27 City & State 28 SARASOTA FL Zip 29 34235-2250		3. Date Incorporated or Qualified 08/23/1983	
25 SARASOTA		30 SARASOTA		4. FEI Number 59-2317049 Applied For Not Applicable	
23		28		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
24		29		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
25		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

**LOWE, BUDDY
8360 DANNER DRIVE
SARASOTA FL 34240**

10. Name and Address of New Registered Agent

81 Name SHERY CONWAY
82 Street Address (P.O. Box Number is Not Acceptable) 4800 SUNDAY COURT
83
84 City SARASOTA
85 Zip Code 34235

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 *Sherry Conway* (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PVD	<input checked="" type="checkbox"/> DELETE	1.1 TITLE ACTING PRESIDENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME LOWE, BUDDY		1.2 NAME SHERY CONWAY	
STREET ADDRESS 6971 PROCTOR BLVD.		1.3 STREET ADDRESS 4800 SUNDAY COURT	
CITY-ST-ZIP SARASOTA FL		1.4 CITY-ST-ZIP SARASOTA, FL 34235-2250	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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: *Sherry Conway* **ACTING PRESIDENT 4800 SUNDAY COURT (941) 351-3010**

CR2E034 (10/97)