

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

**FILED**  
**Mar 04 1997 8:00am**  
**Secretary of State**

PROFIT CORPORATION  
 ANNUAL REPORT  
**1997**



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
 Secretary of State  
 DIVISION OF CORPORATIONS

**DOCUMENT # G63688** (7)

1. Corporation Name  
**HILL'S QUALITY PLUMBING, INC.**



Principal Place of Business

**1809 RIDGEWOOD AVENUE**  
~~4609 RIDGEWOOD AVE~~ **DELETE**  
**HOLLY HILL FL 32117-1733**  
 US

Mailing Address

**P. O. BOX 250801**  
~~PO BOX 001~~ **DELETE**  
**HOLLY HILL FL 32125-0801**  
 US

3. Date Incorporated or Qualified **10/01/1983** 3a. Date of Last Report **04/19/1996**

2. Principal Place of Business

21 State, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 State, Apt. #, etc.

27 City & State

28 Zip

30 Country

4. FEI Number **59-2354014** Applied For  Not Applicable

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

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

**SMITH, HORACE, JR.**  
**444 SEABREEZE BLVD.**  
**DAYTONA BEACH FL 32118**

10. Name and Address of New Registered Agent

81 Name  
 82 Street Address (P.O. Box Number is Not Acceptable)  
 83  
 84 City **FL** 85 Zip Code

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 of registered agent and for applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	<b>DJP</b>	<input type="checkbox"/> DELETE
NAME	<b>HILL, RICHARD L</b>	
STREET ADDRESS	<b>1242 VINE STREET</b>	
CITY - ST - ZIP	<b>DAYTONA BCH, FL 00000</b>	
TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>HILL, BARBARA</b>	
STREET ADDRESS	<b>1242 VINE STREET</b>	
CITY - ST - ZIP	<b>DAYTONA BCH FL</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do 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: *Richard L Hill* **RICHARD L HILL**

Date

Daytime Phone #

**904-672-4181**

CR2E034 (9/96)