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Feb 21 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 # H50595

(8)

1. Corporation Name
LANDERS PLUMBING, INC.

Principal Place of Business
3218 N.W. 4TH AVENUE
CAPE CORAL FL 33909

Mailing Address
3218 N.W. 4TH AVENUE
CAPE CORAL FL 33909-6720

3. Date Incorporated or Qualified
04/04/1985

3a. Date of Last Report
04/03/1996

2. Principal Place of Business

21 LANDERS Plumbing INC.

22 309 S.E. 4th Place

23 CAPE CORAL, Florida

24 33990

Country

25 Lee

2a. Mailing Address

26 LANDERS Plumbing INC.

27 309 S.E. 4th Place

28 CAPE CORAL, Florida

29 33990

30 Lee

4. FEI Number
59-2506927

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

LANDERS, ROBERT E.
3218 N.W. 4 AVE.
CAPE CORAL FL 33909

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: typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP
NAME LANDERS, ROBERT E.
STREET ADDRESS 3218 N.W. 4 AVE.
CITY-ST-ZIP CAPE CORAL FL

TITLE D
NAME LANDERS, RUTH A.
STREET ADDRESS 3218 N.W. 4 AVE.
CITY-ST-ZIP CAPE CORAL FL

TITLE V
NAME LANDERS, ROBERT E. JR.
STREET ADDRESS 4465 ARMEDA AVE
CITY-ST-ZIP FT. MYERS FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
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 or changed, or on an attachment with an address.

SIGNATURE:

Robert E. Landers

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-16-97 941-5746151

Date

Daytime Phone #

CR2E034 (9/96)