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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H73225

(5)

REDI-ROOTER PLUMBING SEWER & DRAIN CLEANING SERV ICE, INC.

Mailing Address

**FILED** Mar 05 1997 8:00am Secretary of State



Principal Place	e of Business	Mailir	Mailing Address P. O. BOX 290171				A 100 (0); Bitt (0000 (0)) A 100 (00) Bitt 0120 BITT 012				
4901 E ADAMO	DR ·										
G-33			A FL 33687-0171								
TAMPA FL 3360 US	<b>15</b>	05	us				3. Date Incorporated or Qualified	3a. Dat	e of Last R	eport	
							08/23/1985	02/0	7/1996		
2. Principal Pl	lace of Business	2a. M	ailing Address				4. FEI Number		Ap	plied For	
21		26	26				.59-2580315 Not Applicable				
Suite, Apt.	#, etc	ļ <sub>1</sub>	uite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 / Fee Re		
City & State	0	27	ity & State			• / • • • • • • • • • • • • • • • • • •	& Floation Compaign Stranging				
23 City & State	e	h	28				6. Election Campaign Financing Trust Fund Contribution	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution  Added to Fees			
Zip	Country	Z0   Zi	in	Co	untry		8. This corporation has liability for i				
24	25	29	·r-	30			Florida Statutes	Yes [	] No	. 100.001.	
24;	9. Name and Address of Curre		ed Agent	100	T		10. Name and Address of New Re	gistered A	gent		
DVI	E, TERRENCE F.				81	Name		T	<del></del>		
	DEL WE88 BLVD										
SUN CITY CENTER FL 33572				82 Street Addre			Address (P.O. Box Number is Not Acceptate	(8)			
0011	OH FOLKILITY COOPE				83		· · · · · · · · · · · · · · · · · · ·				
									_		
					84	City		FL	85 Zip	Code	
	to the participant of Contage 607.06	02 and £07	1509 Florida State	itos the s	bou	namad	corporation submits this statement for the p		changing it	s registered	
office or r	egistered agent, or both, in the Stat	e of Florida	Such change was	authorize	d by	the cor	poration's board of directors. I hereby accep	of the appo	ointment as	registered	
agent. La	m familiar with, and accept the obliq	gations of, S	Section 607.0505, F	-lorida Sta	itutes	3.					
SIGNATURE.				ove D.			e required when reinstating)	DATE	<del></del>		
12.	Signature, typed or printed name of registered at OFFICERS At			13.		on eignazure	ADDITIONS/CHANGES TO OFFIC		DIRECTOR	3S IN 12	
TITLE	PCD	40 DILLOI	DELETE	1.1.1			1		Change	Addition	
l '	CENSULLO, THOMAS J.		C Deceie		IAME			'			
NAME ONLY 15 (IDEOD	301 FOREST PARK AVE					ADDRESS					
STREET ADDRESS	TEMPLE TERR FL					* :					
CITY-ST-7@	VSD		DELETE		ITLE	ST-ZIP			Change	Addition	
1	HALE, ALFRED A JR		CJ ottere		NAME			,			
NAME	11010 CARROLLWOOD DR					ADDRESS					
STREET ADDRESS	TAMPA FL										
C(1Y+S(+ZIP	TP TP		DELETE		CILY-:	ST-ZIP	D		Change	Addition	
TITLE	CENSULLO, PATRICIA		Las OLCETE	1	VAME		1 **			<b>—</b> · · · · · · · · · · · · · · · · · · ·	
NAME	301 FOREST PARK AVE.					I ADDOCAD					
STREET ADDRESS	TEMPLE TERR FL					ADDRESS					
CITY - ST - ZIP	I TWILL IEIN IL		DELETE		CITY-:	ST - ZIP	Secretary		Change	Addition	
TITLE			□ nereie				Sholby T Uni-		- Ormile	MEN PHONOCOLI	
NAME					NAME		Shelby J. Hale				
STREET ADDRESS				1		ADDRESS	11010 Carrollwoo	a Dr	•	i	
C/TY+ST-ZIP			Access			ST-ZIP	Tampa, Fl.	,	Change	Addition	
TITLE			☐ DELETE		TITLE				LILL LYREINE	L MOUNTON	
NAME					NAME						
STREET ADDRESS				5.3	STREET	I ADDRESS					
CHY-S1-ZiP						ST-ZIP			7.05	4 22:00	
TITLE	İ		DELETE	6.1	TITLE				Change	Addition	
NAME				6.21	NAME	+ 1 · .	one state of the	San Light Sh	11 (a) 1 (b) (c) (c) (c)	e significant significant	
STREET ADDRESS			-	63	STAEE1	r address					
CITY-ST-ZIP				6.4	CITY-1	61-ZIP		سي <u>زا سن براس</u>	4		

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: Thomas J. Oer

Feb 26, 1987