

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 JAN 13 AM 10:20

DOCUMENT # H90174 (4)
1. Corporation Name
PLUMBING AND MECHANICAL SUPPLY COMPANY, INC.

Principal Place of Business
**2302 TOWN STREET
PENSACOLA FL 32505**

Mailing Address
**2302 TOWN STREET
PENSACOLA FL 32505**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
12/12/1985

3a. Date of Last Report
01/24/1994

4. FEI Number
59-2608775

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

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country

9. Name and Address of Current Registered Agent

**DAVIDSON, SAM J
2302 TOWN STREET
PENSACOLA FL 32505**

10. Name and Address of New Registered Agent

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

11. Pursuant to the provisions of Sections 607.0302 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent for 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 607.1505, Florida Statutes.

SIGNATURE

Signature of, listed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY ST ZIP
PD	PARAZINE, CLYDE L.	8148 YANCY AVE PENSACOLA FL	
STD	DAVIDSON, SAM J.	1533 BAYWOODS RD. GULF BREEZE FL	
VD	LATINA, LEE S.	1430 KINGS LAKE DRIVE CANTONMENT FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

	Change	Addition
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 is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information included in 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 its 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SAM J. DAVIDSON

1/9/95

904-469-9504