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

Mailing Address

17203 BACK BEACH RD

PANAMA CITY BCH. FL 32413

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # J16987**

1. Corporation Name

Principal Place of Business

PANAMA CITY BCH. FL 32413

17203 BACK BEACH RD

NED PRESTWOOD PLUMBING, INC.

2. Principal Pl	lace of Business	2a. Mai	iling Address				4. FEI Number	Ap	plied For	ı
21	•	26	26				59-2687252	No	t Applicable	l
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					- C	\$8.75 △	Additional	1
22			27				5. Certifcate of Status Desired	Fee Re	quired	ı
City & State			City & State				6. Election Campaign Financing	\$5.00	May Be	l
23			28				Trust Fund Contribution	Added to		l
Zip	Country Zip Cou				ntry		8. This corporation owes the current year Int.	angible		l
24	25 29			30			Personal Property Tax.	Yes	<b>₽</b> ₩₀	l
9. Name and Address of Current Registered Agent							10. Name and Address of New Registered	Agent		l
					81	Name				l
PRESTWOOD, LARRY					82	Stroot Add	dress (P.O. Box Number is Not Acceptable)			l
17203 BQCK BEACH RD					82	Sileet Au	dress (F.O. Box Number is Not Acceptable)			l
PANAMA CITY BCH. FL 32413					83					1
					_			T=1 7:- (	2-4-	l
			,		84	City	FL	85 Zip C	Jode	l
44. Discount to the application of Sections 607 0502 and 607 1508. Elected Statutes the apply grand compretion 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							•			l
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if appli	cable (NOTE. Re	egistered	Agent	t signature requi	red when reinstating) DATE			60
12.	OFFICERS AND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICERS AN			(11/98	
TITLE	PD	DELETE 1.1		1.1 717	1.1 TITLE			Change Change	☐ Addition	=
NAME				1.2 NA	1.2 NAME		- D . a			8
STREET ADDRESS				1.3 ST	1.3 STREET ADDRESS 23		2312 50an rue			R2E034
CITY-ST-ZIP	PANAMA CITY BCH. FL 1.4 CI			Y-\$1	-ZIP	2312 Joan Aue Janama City Brock, Fl 3	<u> 80468</u>		1 25	
TITLÉ	☐ DELETE 2.1TI			LΕ		1	Change	☐ Addition	١	
NAME	22 N			ME					l	
STREET ADDRESS	2.3 \$				REET.	ADDRESS				Í
CITY-ST-ZIP	2.4				TY-ST	T-27P				
TITLE	☐ DELETE 3.1			3.1 TIT	3.1 TITLE		<del></del>	Change	☐ Addition	ĺ
NAME	3			3.2 NA	3.2 NAME					l
STREET ADDRESS			3357			ADDRESS				l
CITY-ST-ZIP				3 4. CI	TY-S1	T-ZIP				l
TITLE				4.1 TIT	_			Change	☐ Addition	
NAME				4.2 N	4, 2 NAME					l
STREET ADDRESS						ADDRESS			į	l
	4.4 CI								į.	ĺ
CITY-ST-ZIP TITLE			☐ DELETE	5.1 TII	_	-211		Change	☐ Addition	ì
				5.2 NA						
NAME						ADDRESS			ļ	
STREET ADDRESS				5.4 CI						
CITY-\$T-ZIP			☐ DELETE	6.1 717		-		Change	Addition	
TITLE				6.2 NA						l
NAME						ADDRESS				l
STREET ADDRESS	for the second									l
CITY-ST-ZIP	.				6.4 CITY-ST-ZIP					i

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, with all other like empowered. SIGNATURE:

FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90162 041 \*\*\*150.00

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

05/30/1986

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