

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 90325 008 ***150.00

0700743 IN

DOCUMENT # J16987

1. Entity Name

NED PRESTWOOD PLUMBING, INC.



Principal Place of Business
2312 JACN AVE
PANAMA CITY FL 32408
US

Mailing Address
PO BOX 18168
PANAMA CITY BEACH FL 32417
US

2. Principal Place of Business

3. Mailing Address

2312

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Joan Ave

City & State

City & State

Panama City Beach, FL

Zip

Country

Zip

Country

32408

US

4. FEI Number

59-2687252

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

PRESTWOOD, LARRY
17203 BOCK BEACH RD
PANAMA CITY BCH. FL 32413

Name

Prestwood, Larry

Street Address (P.O. Box Number is Not Acceptable)

2312 Joan Ave

City

Panama City Beach FL

Zip Code

32408

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Larry Prestwood

Larry Prestwood

4/30/03

Signatures, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Delete
NAME **PRESTWOOD, LARRY**
STREET ADDRESS **2312 JOAN AVE**
CITY-ST-ZIP **PANAMA CITY BCH. FL 32408**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Larry Prestwood **Larry Prestwood** **4/30/03**

850-234-2476

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)