

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **J27788** (5)
1. Corporation Name
PARK PLUMBING & HARDWARE SPECIALTY, INC.



Principal Place of Business
**2586 NORTH ORANGE BLOSSOM TRAIL
ORLANDO FL 32804**

Mailing Address
**2586 NORTH ORANGE BLOSSOM TRAIL
ORLANDO FL 32804**

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

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

3. Date Incorporated or Qualified
08/08/1986

3a. Date of Last Report
03/16/1995

4. FEI Number
59-2701192

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

**HENDREN, LLOYD
2586 NORTH ORANGE BLOSSOM TRAIL
ORLANDO FL 32804**

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
FL

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 607.0705, Florida Statutes.

SIGNATURE

Signature of the person authorized to file this statement

Signature of the person authorized to register the corporation

Date

12. OFFICERS AND DIRECTORS

1. NAME: **PD HENDREN, LLOYD** ☐ DELETE
2. STREET ADDRESS: **4510 WESTVIEW LANE**
3. CITY-STATE-ZIP: **TITUSVILLE FL**

1. NAME: **VSTD TOBE, LINDA L.** ☐ DELETE
2. STREET ADDRESS: **790 KEY LARGO DR. SOUTH**
3. CITY-STATE-ZIP: **TITUSVILLE FL**

1. NAME: ☐ DELETE
2. STREET ADDRESS:
3. CITY-STATE-ZIP:

1. NAME: ☐ DELETE
2. STREET ADDRESS:
3. CITY-STATE-ZIP:

1. NAME: ☐ DELETE
2. STREET ADDRESS:
3. CITY-STATE-ZIP:

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. NAME: ☐ Change ☐ Addition
2. STREET ADDRESS:
3. CITY-STATE-ZIP:

1. NAME: ☐ Change ☐ Addition
2. STREET ADDRESS:
3. CITY-STATE-ZIP:

1. NAME: ☐ Change ☐ Addition
2. STREET ADDRESS:
3. CITY-STATE-ZIP:

1. NAME: ☐ Change ☐ Addition
2. STREET ADDRESS:
3. CITY-STATE-ZIP:

1. NAME: ☐ Change ☐ Addition
2. STREET ADDRESS:
3. CITY-STATE-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 119.07(3)(g), 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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature of the person authorized to register the corporation

CR2E034 (12/95)