

**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 # **J74544 (4)**  
1. Corporation Name  
**ALL OUTDOOR PLUMBING, INC.**



Principal Place of Business: **4026 HWY 441 S E OKEECHOBEE FL 34974**  
Mailing Address: **4026 HWY 441 S E OKEECHOBEE FL 34974**

2. Principal Place of Business: **21 #1 Jordan Loop**  
22 Suite, Apt. #, etc.  
23 **Okeechobee Florida**  
24 Zip **34974** 25 Country **US**  
26 **#1 Jordan Loop**  
27 Suite, Apt. #, etc.  
28 **Okeechobee Florida**  
29 Zip **34974** 30 Country **US**

3. Date Incorporated or Qualified: **05/27/1987**  
3a. Date of Last Report: **08/14/1995**  
4. FEI Number: **59-2812891**  
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. 193.032 Florida Statutes:  Yes  No

**9. Name and Address of Current Registered Agent**

**PREVATT, MITCHELL**  
**4026 HWY 441 S E**  
**OKEECHOBEE FL 34974**

**10. Name and Address of New Registered Agent**

81 Name: **Howard Dean Cassels**  
82 Street Address (P.O. Box Number is Not Acceptable): **#1 Jordan Loop**  
83  
84 City: **Okeechobee** FL 85 Zip Code: **34974**

11. Pursuant to the provisions of Sections 607.0602 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 607.0505, Florida Statutes.

SIGNATURE: **Howard Dean Cassels President** Date: **5/3/96**

**12. OFFICERS AND DIRECTORS**

TITLE	<b>P</b> <input checked="" type="checkbox"/> DELETE
NAME	<b>PREVATT, MITCHELL</b>
STREET ADDRESS	<b>4026 HWY 441 S E</b>
CITY- ST- ZIP	<b>OKEECHOBEE FL</b>
TITLE	<b>V</b> <input type="checkbox"/> DELETE
NAME	<b>PREVATT, NORMA</b>
STREET ADDRESS	<b>9751 HIGHWAY 78 WEST</b>
CITY- ST- ZIP	<b>OKEECHOBEE FL</b>
TITLE	<b>ST</b> <input type="checkbox"/> DELETE
NAME	<b>CASSELS, DONNA J</b>
STREET ADDRESS	<b>636 S W 85TH AVE</b>
CITY- ST- ZIP	<b>OKEECHOBEE FL</b>
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

11 TITLE	<b>President</b> <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12 NAME	<b>Howard Dean Cassels</b>
13 STREET ADDRESS	<b>#1 Jordan Loop</b>
14 CITY- ST- ZIP	<b>Okeechobee Fla 34974</b>
21 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	<b>4026 Hwy 441 S E.</b>
23 STREET ADDRESS	<b>Okeechobee Florida 34974</b>
24 CITY- ST- ZIP	
31 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	<b>#1 Jordan Loop</b>
33 STREET ADDRESS	<b>Okeechobee Florida 34974</b>
34 CITY- ST- ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY- ST- ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY- ST- ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 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 119.07(3)(k), 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: **Donna J. Cassels** Date: **5/3/96** Phone: **941-763-7616**

CR2E034 (12/95)