

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

PROFIT CORPORATION ANNUAL REPORT 1995

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



DOCUMENT # K89066 (0)

1. Corporation Name
DAUGHERTY PLUMBING, INC.

Principal Place of Business Mailing Address

4107 19 AVE. WEST 4107 19 AVE. WEST
1002 40TH AVENUE WEST
BRADENTON FL 34205 BRADENTON FL 34205
US US

2. Principal Place of Business 2a. Mailing Address

21 4107-19 AVE. West 26 4107 19 Ave W
Suits, Apt. #, etc. Suits, Apt. #, etc.
22 Bradenton FL 27
City & State City & State
23 34205 28 Bradenton FL
Zip City & State
24 25 29 30
Country Zip Country

FILED
95 AUG 10 PM 12:12
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 3a. Date of Last Report
05/18/1989 06/03/1994

4. FEI Number Applied For
65-0123567 Not Applicable

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. 100.020, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

DAUGHERTY, D. EDWARD, JR.
3015 1ST AVE W
BRADENTON FL 34205

10. Name and Address of New Registered Agent

B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City FL B5 Zip Code

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 607.0505, Florida Statutes.

SIGNATURE: *Michael D. Daugherty* DATE: 8-3-95

Signature, typed or printed name of registered agent and title of office (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D DAUGHERTY, MICHAEL D.	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DAUGHERTY, MICHAEL D.	1.2 NAME	
STREET ADDRESS	1002 - 40TH ST. WEST	1.3 STREET ADDRESS	
CITY - ST - ZIP	BRADENTON FL	1.4 CITY - ST - ZIP	
TITLE	D DAUGHERTY, TIMOTHY K.	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DAUGHERTY, TIMOTHY K.	2.2 NAME	No longer an
STREET ADDRESS	4107 19 AVE W	2.3 STREET ADDRESS	OFFICER/DIRECTOR
CITY - ST - ZIP	BRADENTON FL	2.4 CITY - ST - ZIP	
TITLE	D DAUGHERTY, DERWIN E., SR	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DAUGHERTY, DERWIN E., SR	3.2 NAME	
STREET ADDRESS	4107 - 19TH AVE. WEST	3.3 STREET ADDRESS	
CITY - ST - ZIP	BRADENTON FL	3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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)(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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Michael D. Daugherty* DATE: 8-3-95

SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR

CR2E034 (3/95)