Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90205 021 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **K89066**

1. Corpora ion Name

DAUGHERTY PLUMBING, INC.

Principal Place of Business Mailing Address						((((((((((((((((((((11411 51511 61411 5	141. 4.4
4107-19 AVENUE. WEST BRADENTON FL 34205			4107 19TH AVENUE. WEST BRADENTON FL 34205						
US			US			DO NOT WRITE IN THIS SPACE			
						3. Date Ir corporated or Quali	ed		
						05/18/1989			
2. Principal P	lace of Business		2a. Mailing Address			4. FEI Number		Ap	plied For
21			26			65-0123567			t Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	.	\$8.75 A	
City & S at	e		City & State	_		Election Campaign Financi Trust Fund Contribution	ng 🗆	\$5.00 Added t	, ,
Zip	Coun	try	Zip	Counti	ry	This corporation owes the Personal Property Tax.	current year In	itangible Yes	□No
	9. Name and Add	ess of Current		<u>,,,</u>		10. Name and Address of Ne	w Registered	Agent	
		<u></u>	<u> </u>	8	1 Name				
DAUGHERTY, D. EDWARD, JR. 3015 1ST AVE W					2 Street Add	dress (P.O. Box Number is Not Acc	eptable)		
BRADENTON FL 34205				8	3				
				8	4 City		FL	85 Zip (Code
office or r agent. I a SIGNATURE	egistered agent, or bot im familiar with, and ac Signature, typed or printed nar	cept the obligation	ons of, Section 607.0505, Flor	ida Statute	s s.	ion's board of cirectors. I hereby as red when reinstaling)	DATE	intrient as re	
12.		OFFICERS AND		13.		ADDITIONS/CHANGES TO	OFFICERS A	ND DIRECTO	
TITLE	D		☐ DELETE	1.1 TITLE				Change	Addition
NAME	DAUGHERTY, MIC	HAEL D.		1 2 NAME	E				
STREET ADDRESS	1002 - 40TH ST. V	NEST		1.3 STRE	ET ADDRESS				
CITY-ST-ZIP	BRADENTON FL			1.4 CITY-	ST-ZIP				
TITLE	D		☐ DELETE	2.1 TITLE				Change	☐ Addition
NAME	DAUGHERTY, DEF	RWIN E., SR		2.2 NAME	E				
STREET ADDRESS	4107 - 19TH AVE.			2.3 STRE	ET ADDRESS				
CITY-ST-ZIP	BRADENTON FL			2. 4 CITY	-ST-ZIP				
TITLE		· _	DELETE	3.1 TITLE				Change	☐ Addition
NAME				3.2 NAME	■				
STREET ADDRESS				33STRE	EET ADDRESS				
CITY-ST-ZIP				34 CITY	-ST-ZIP				
TITLE		·	☐ DELETE	4.1 TITLE				Change	☐ Addition
NAME				4 2 NAM	E				
STREET ADDRES S				4.3 STRE	ET ADDRESS				
CITY-ST-ZIP				4.4 CITY	-ST-ZIP				
TITLE			☐ DELETE	5.1 TITLE	: "			Change	Addition
NAME				5.2 NAME	E				ļ

CITY-ST-ZIP 14. Thereby 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 if 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 a lighter than the information 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 if 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 a light of the corporation of the corporation or the receiver or trustee empowered.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

64 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

□ DELETE

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

Addition