

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

**APPROVED
AND
FILED**

MAY - 1 AM 5:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Norment
Secretary of State
Tallahassee, Florida 32399-0001

DOCUMENT # L36995

(3)

1. Corporation Name

A-1 PLUMBING SUPPLY & SPECIALTIES, INC.

Principal Office of Business

% DUANE GERALD LANIER
5152 UNIVERSITY BLVD. WEST
JACKSONVILLE FL 32216

Principal Office of Business

% DUANE GERALD LANIER
5152 UNIVERSITY BLVD. WEST
JACKSONVILLE FL 32216

DO NOT WRITE IN THIS SPACE

3. Date incorporated or qualified

12/14/1989

3a. Date of Last Report

05/01/1994

4. FIC Number

59-2961189

Applied For

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. 199.032
Florida Statutes

☐ Yes ☐ No

2. Principal Office of Business

21. State and County

22. City and State

23. City and State

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**COOLEY, STEVEN W
5152 UNIVERSITY BLVD W
JACKSONVILLE FL 32216**

81. Name

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

83. City

84. State

FL

85. Zip Code

11. Pursuant to the provisions of Sections 197.03(1), (2), and 199.03(1) 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 197.03(2)(b) Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

1. NAME	OD
2. NAME	COOLEY, STEVEN W.
3. STREET ADDRESS	5635 NETTIE RD
4. CITY AND STATE	JACKSONVILLE FL
5. NAME	STD
6. NAME	LANIER, DUANE GERALD
7. STREET ADDRESS	4308 NAPOLI RD
8. CITY AND STATE	JACKSONVILLE FL
9. NAME	
10. NAME	
11. STREET ADDRESS	
12. CITY AND STATE	
13. NAME	
14. NAME	
15. STREET ADDRESS	
16. CITY AND STATE	
17. NAME	
18. NAME	
19. STREET ADDRESS	
20. CITY AND STATE	
21. NAME	
22. NAME	
23. STREET ADDRESS	
24. CITY AND STATE	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. NAME	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY AND STATE	☐ Change ☐ Addition
5. NAME	
6. NAME	
7. STREET ADDRESS	
8. CITY AND STATE	☐ Change ☐ Addition
9. NAME	
10. NAME	
11. STREET ADDRESS	
12. CITY AND STATE	☐ Change ☐ Addition
13. NAME	
14. NAME	
15. STREET ADDRESS	
16. CITY AND STATE	☐ Change ☐ Addition
17. NAME	
18. NAME	
19. STREET ADDRESS	
20. CITY AND STATE	☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 197.03(2)(b), Florida Statutes. I further certify that the information included 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 treasurer or holder of a security interest in the corporation and that my signature is required by Chapter 197, Florida Statutes, and that my name appears in Block 12 or Block 13 of this document, or as an attachment with an address.

SIGNATURE:

Signature of Duane Gerald Lanier
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR