

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 13, 2001 8:00 am
Secretary of State

01-13-2001 90058 023 ***150.00



DO NOT WRITE IN THIS SPACE

DOCUMENT # L59980			
1. Entity Name HUNSBERGER PLUMBING COMPANY, INC.			
Principal Place of Business 5008 W. LINEBAUGH AVE SUITE 47 TAMPA FL 33624 US		Mailing Address 5008 W. LINEBAUGH AVE SUITE 47 TAMPA FL 33624 US	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 59-3022610		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
HUNSBERGER, WILLIAM A. 1412 BIG MOSS LAKE RD LUTZ FL 33549		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		FL Zip Code	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.			
SIGNATURE _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)			
9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. ☐ (See criteria on back)		FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State	
		10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
11. OFFICERS AND DIRECTORS			
TITLE	PVDS ☐ Delete		
NAME	HUNSBERGER, WILLIAM A.		
STREET ADDRESS	1412 BIG MOSS LAKE RD		
CITY-ST-ZIP	LUTZ FL 33549		
TITLE	TS ☐ Delete		
NAME	HUNSBERGER, WILLIAM A.		
STREET ADDRESS	1412 BIG MOSS LAKE ROAD		
CITY-ST-ZIP	LUTZ FL 33549		
TITLE	CM ☐ Delete		
NAME	HUNSBERGER, WILLIAM A.		
STREET ADDRESS	1412 BIG MOSS LAKE RD		
CITY-ST-ZIP	LUTZ FL 33549		
TITLE	☐ Delete		
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE	☐ Delete		
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE	☐ Delete		
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	☐ Change ☐ Addition		
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE	☐ Change ☐ Addition		
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE	☐ Change ☐ Addition		
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE	☐ Change ☐ Addition		
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
13. I hereby 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with an other like empowered.			
SIGNATURE: <u>William Hunsberger Pres</u> 1/8/00 813 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #			

CR2E034 (10/00)