

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 14, 2003 8:00 am
Secretary of State

04-14-2003 90727 050 ***150.00

0466415 AV

DOCUMENT # L59980

1. Entity Name
HUNSBERGER PLUMBING COMPANY, INC.



Principal Place of Business

5006 W. LINEBAUGH AVE
SUITE 47
TAMPA FL 33624
US

Mailing Address

5006 W. LINEBAUGH AVE
SUITE 47
TAMPA FL 33624
US

2. Principal Place of Business

111 CHAPMAN RDE
Suite, Apt. #, etc.

3. Mailing Address

111 CHAPMAN RDE
Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State

Lutz FL

City & State

Lutz FL

4. FEI Number

59-3022610

Applied For

Not Applicable

Zip

33549

Country

USA

Zip

33549

Country

USA

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

HUNSBERGER, WILLIAM A.
1412 BIG MOSS LAKE RD
LUTZ FL 33549

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent Signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐ **\$5.00 May Be Added to Fees**

10. 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

11. 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
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CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

WILLIAM A. HUNSBERGER **PRESIDENT**

4-9-03 8:13
961 8895

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)