

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2001 8:00 am
Secretary of State
 04-23-2001 90171 004 ***158.75

DOCUMENT # L86133

1. Entity Name

HIGH SPRINGS PLUMBING & ELECTRIC, INC.

Principal Place of Business

**G/O JOSEPH W. DAVIS
 RT 2 BOX 879
 HIGH SPRINGS FL 32643
 US**

Mailing Address

**RT 2 BOX 367
 HIGH SPRINGS FL 32643
 US**

2. Principal Place of Business

Rt 2 Box 367

3. Mailing Address

Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

High Springs, FL

City & State

F

Zip

32643

Country

USA

Zip

32643

Country

4. FEI Number

59-3024987

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**DAVIS, JOSEPH W. II
 RT 2 BOX ~~879~~ 880
 HIGH SPRINGS FL 32643**

7. Name and Address of New Registered Agent

Name

JOSEPH W. DAVIS II

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

OLD LAKE CITY ROAD - Rt 2 BOX 880

High Springs,

City

FL

Zip Code

32643

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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	D	☐ Delete
NAME	DAVIS, JOSEPH W. II	
STREET ADDRESS	RT 2 BOX 880	
CITY-ST-ZIP	HIGH SPRINGS FL 32643	
TITLE	D	☐ Delete
NAME	DAVIS, DONALD R.	
STREET ADDRESS	RT 2 BOX 879 367	
CITY-ST-ZIP	HIGH SPRINGS FL	
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	Donald R DAVIS P	☒ Change ☐ Addition
NAME	HWY 441 - Rt 2 BOX 368	
STREET ADDRESS	High Springs, FL 32643	
CITY-ST-ZIP		
TITLE	JOSEPH W. DAVIS II	☒ Change ☐ Addition
NAME	Old Lake City Road - Rt 2 BOX 880	
STREET ADDRESS	High Springs, FL 32643	
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 all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/17/01

Daytime Phone #

904-454-1407

CR2E034 (10/00)