


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2007 08:00 AM
Secretary of State

DOCUMENT # N93000001642	
1. Entity Name POLK COUNTY ASSOCIATION OF PLUMBING, HEATING, AND COOLING CONTRACTORS, INC.	

Principal Place of Business 700 KENSINGTON ST LAKELAND, FL 33803 US	Mailing Address PO BOX 553 LAKELAND, FL 33802 US
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DO NOT WRITE IN THIS SPACE



01082007 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-3204893	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent CHRITTON, CHARLES P 5300 SOUTH FLORIDA AVE. LAKELAND, FL 33813
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD MURPHY, KEVIN 2118 WILDWOOD LANE AUBURNDALE, FL 33823
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GARBER, SAM 3837 PROGRESS DR LAKELAND, FL 33811
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KONTNY, WARREN J 1815 STERLING DRIVE LAKELAND, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SMITH, DAVID 700 KENSINGTON ST LAKELAND, FL 33803
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WOODS, TERRY S 36 SPIRIT LAKE RD WINTER HAVEN, FL 33380
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HIBBARD, C PAUL 5036 FAIRFAX W LAKELAND, FL

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U000000596433
01/23/07-80079-008 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 817, 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:  Date: 1-19-07 Phone: 863-669-1905