

FILE NOW: FILING FEE IS \$61.25

FILED  
Feb 05 1998 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N97000005821 (0)

1. Corporation Name

HYDRO-MECHANICAL CONTRACTORS OF BROWARD COUNTY,  
INC.



Principal Place of Business

Mailing Address

3471 NORTH FEDERAL HWY.  
FORT LAUDERDALE FL 33306-1048

3471 NORTH FEDERAL HWY.  
FORT LAUDERDALE FL 33306-1048

3. Date Incorporated or Qualified

10/15/1997

4. FEI Number

23-7025802

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

Country

29 Zip

Country

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be  
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GLADE, FRANK L  
3471 NORTH FEDERAL HWY.  
FORT LAUDERDALE FL 33306-1048

81 Name

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

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

1.1 TITLE President, Director ☐ Change ☒ Addition  
1.2 NAME William R. Frenzel  
1.3 STREET ADDRESS 3260 N. Andrews Avenue  
1.4 CITY - ST - ZIP Fort Lauderdale, FL 33309

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

2.1 TITLE Vice President, Director ☐ Change ☒ Addition  
2.2 NAME David Bittner  
2.3 STREET ADDRESS 4410 S.W. 102nd Avenue  
2.4 CITY - ST - ZIP Davie, FL 33328

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

3.1 TITLE Secretary, Director ☐ Change ☒ Addition  
3.2 NAME Kenneth F. Rice  
3.3 STREET ADDRESS 3420 N.E. 13th Terrace  
3.4 CITY - ST - ZIP Pompano Beach, FL 33064

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

4.1 TITLE Treasurer, Director ☐ Change ☒ Addition  
4.2 NAME James Rogers  
4.3 STREET ADDRESS 26 N.E. First Court  
4.4 CITY - ST - ZIP Dania, FL 33004

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME 000002423070  
5.3 STREET ADDRESS -02/06/98--01003--045  
5.4 CITY - ST - ZIP \*\*\*61.25

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY - ST - ZIP

14. 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 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 receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

(054) 565-8820

CR2E037 (10/97)