

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000008154

1. Entity Name

THUNDER BAY PLUMBING, INC.

Principal Place of Business

7631-18TH AVENUE NORTH
ST PETERSBURG FL 33710

Mailing Address

7631-18TH AVENUE NORTH
ST PETERSBURG FL 33710

2. Principal Place of Business

3. Mailing Address

PO. Box 47903

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
ST. PETERSBURG, FL

Zip

Country

Zip
33743

Country
U.S.

4. FEI Number

59-3620427

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

BABCOCK, RICHARD
7631-18TH AVENUE NORTH
ST PETERSBURG FL 33710

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

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS BABCOCK, RICHARD 7631-18TH AVENUE NORTH ST PETERSBURG FL 33710 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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:

Richard A. Babcock RICHARD A. BABCOCK DPS 3/9/01 727-346-0701
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)

FILED
Mar 12, 2001 8:00 am
Secretary of State

03-12-2001 90426 044 ***158.75