

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 29, 2003 8:00 am
Secretary of State

04-29-2003 90066 045 ***150.00

DOCUMENT # **P01000010562**

1. Entity Name

ASHLEY PLUMBING CO., INC.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1738 KINGS AVENUE
Suite, Apt. #, etc.

3. Mailing Address
1738 KINGS AVENUE
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
JACKSONVILLE, FLORIDA

City & State
JACKSONVILLE, FLORIDA

4. FEI Number
59-3676354

Applied For
Not Applicable

Zip
32207
Country
USA

Zip
32207
Country
USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
ANDREWS, DANIEL S.

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

1022 CHANDLER OAKS DRIVE

City JACKSONVILLE FL Zip Code 32221

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 DANIEL S. ANDREWS

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

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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
NAME
STREET ADDRESS
CITY - ST - ZIP
PSD
ASHLEY, CHRISTOPHER S.
8801 MESSER ROAD
JACKSONVILLE, FLORIDA 32219

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VTD
ANDREWS, DANIEL S.
1022 CHANDLER OAKS DRIVE
JACKSONVILLE, FLORIDA 32221

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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE: DANIEL S. ANDREWS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-28-03

Date

(904) 393-7959

Daytime Phone #

CR2E034B (12/02)