

# 2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P93000035127

1. Entity Name  
DARLEY'S PLUMBING, INC.



FILED

06 SEP 12 PM 1:02

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
4472 PHILLIPS HIGHWAY  
JACKSONVILLE, FL 32207

Mailing Address  
4472 PHILLIPS HIGHWAY  
JACKSONVILLE, FL 32207

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

08092006

Chg-P

CR2E034 (11/05)

4. FEI Number  
59-3181245

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

DARLEY, CARL L  
6275 KELLOW DRIVE  
JACKSONVILLE, FL 32216

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Amended AR is \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE MR ☐ Delete  
NAME DARLEY, CARL L  
STREET ADDRESS 4472 PHILLIPS HIGHWAY  
CITY-ST-ZIP JACKSONVILLE, FL 32207

TITLE MRS ☐ Delete  
NAME DARLEY, NEIDA R  
STREET ADDRESS 5158 CAMELLIA CIRCLE SOUTH  
CITY-ST-ZIP JACKSONVILLE, FL 32207

TITLE MR ☐ Delete  
NAME DARLEY, CARL W  
STREET ADDRESS 5158 CAMELLIA CIR S  
CITY-ST-ZIP JACKSONVILLE, FL 32207

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☒ Change ☐ Addition  
NAME Darley, Carl L  
STREET ADDRESS 4472 Phillips Highway  
CITY-ST-ZIP Jacksonville, FL 32207

TITLE D ☒ Change ☐ Addition  
NAME Darley, Carl W  
STREET ADDRESS 5158 Camellia Circle South  
CITY-ST-ZIP Jacksonville, FL 32207

TITLE V ☐ Change ☒ Addition  
NAME Darley, Dale  
STREET ADDRESS 1011 Larkspur Loop  
CITY-ST-ZIP Jacksonville, FL 32259

TITLE S ☒ Change ☐ Addition  
NAME Darley, Neida R  
STREET ADDRESS 5158 Camellia Circle South  
CITY-ST-ZIP Jacksonville, FL 32207

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 607, 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:

*Carl Darley*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-15-06

Date

904-727-1484

Daytime Phone #