

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Jan 28, 2004 8:00 am**  
**Secretary of State**

01-28-2004 90005 031 \*\*\*150.00

**DOCUMENT # P94000006277**



1. Entity Name

STANDARD PLUMBING & SUPPLIES CO., INC.

Principal Place of Business

3809 A SOUTH FIRST ST  
LAKE CITY FL 32025  
US

Mailing Address

PO BOX 533  
LAKE CITY FL 32056-0533  
US

94005470



MOORE CR2E034 (11/03)

2. Principal Place of Business

2091 SW Main BLVD.

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Lake City, FL

City & State

4. FEI Number

59-3189290

Applied For

Not Applicable

Zip

32025-0533

Country

Columbia

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

MANGRUM, DAVID E.  
ROUTE 6 BOX 323  
LAKE CITY FL 32025

7. Name and Address of New Registered Agent

Name

DAVID E. Mangrum

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

634 SE. May Hall Terrace

City

Lake City

FL

Zip Code

32025

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

*David E. Mangrum*

(NOTE: Registered Agent Signature required when reinstating)

22 JAN 2004

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2004 Fee will be \$550.00**

**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 P ☐ Delete  
NAME MANGRUM, DAVID E  
STREET ADDRESS RT 6, BOX 323  
CITY-ST-ZIP LAKE CITY FL

TITLE SRVP ☐ Delete  
NAME MANGRUM, ANDREW D  
STREET ADDRESS RT 6 BOX 323  
CITY-ST-ZIP LAKE CITY FL

TITLE SVP ☐ Delete  
NAME MANGRUM, CHRISTOPHER  
STREET ADDRESS RT 6 BOX 323  
CITY-ST-ZIP LAKE CITY FL

TITLE ST ☐ Delete  
NAME MANGRUM, MARY A  
STREET ADDRESS RT 6 BOX 323  
CITY-ST-ZIP LAKE CITY FL

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 DAVID E. Mangrum  
STREET ADDRESS 634 SE. May Hall Terrace  
CITY-ST-ZIP Lake City, FL 32025

TITLE SRVP ☒ Change ☐ Addition  
NAME ANDREW D. Mangrum  
STREET ADDRESS 634 SE. May Hall Terrace  
CITY-ST-ZIP Lake City, FL 32025

TITLE SVP ☒ Change ☐ Addition  
NAME CHRISTOPHER Mangrum  
STREET ADDRESS 196 SE. SETH Nettles Dr  
CITY-ST-ZIP LAKE CITY, FL 32025

TITLE ST ☒ Change ☐ Addition  
NAME MARY A. Mangrum  
STREET ADDRESS 634 SE. May Hall Terrace  
CITY-ST-ZIP Lake City, FL 32025

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 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*David E. Mangrum*

David E. Mangrum

22 JAN 04

Date

386-752-4766

Daytime Phone #