FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT #

P94000044854 (5)

H. STAUFFER PLUMBING, INC.



2. Principal Place o 21 Suite, Apt. #, etc 22 City & State 23 Zip 24		2a. Maring Address 26 Suite. Apt. #, etc 27			3. Date Incorporated or Qualified 06/13/1994	3a. Date of La 05/01	ist Report
21 Suite, Apt. #, etc 22 Otty & State 23 Zip 24		26 Suite. Apt. #, etc 27					/ 1880
Suite. Apt. #, etc 22 Crty & State 23 Zip 24	>-	Suite. Apt. #, etc 27			4. FEI Number		Applied For
22 City & State 23 Zip 24		27]			65-0499618		Not Applicable
Zip 24					5. Certificate of Status Desired		.75 Additional Fee Required
Ζ _Ι Ω 24		Orty & State			6. Election Campaign Financing	- \$	5.00 May Be
24	Country	28			Trust Fund Contribution		dded to Fees
	25	Z _I p	Gount 30	try	8. This corporation has liability for i		ers 199.032,
<u> </u>	Name and Address of Currer		[30]		Fiorida Statutes Yes 10. Name and Address of New R		
				31 Name	TO THE PINE PROPERTY IN	edizteten Wiletti	
Stauffer, Herbert Jr 1104 Pine Tree Dr Lantana Fl 33462				82 Street Address (F.O. Box Number is Not Acceptable)			
LANIANA FL	. 33462		8	33			
			8	14 Orty		85	Zip Code
11. Pursuant to the or registered ago tamiliar with land	provisions of Sections 607.050? ent, or both, in the State of Fluric diaccept the obligations of, Secti	and 607 1508, Fiorida State	utes, the above rized by the co-	named con rporation's bi	poration submits this statement for the purporario of directors. Thereby accept the appo	FL	its registered office
CICALATI IDC			ers				•
566 at a	re typed or protect name of registeries a year	and the diagraphical and		hart 245 op 14 oct	est when redshift g	DATE	
TILE D	OFFICERS AN!		13.		ADDITIONS/CHANGES TO OFFIC	CERS AND DIREC	CTORS IN 12
	TAUFFER, HERBERT J JR	☐ DEFEI€	1 1 7 [1]	ì		Char	ige 🔲 Addition
	104 PINE TREE DR		1.2 NAME	i			
	NTANA FL			ET ADDRESS			
TITLE		[] DELETE	2 1 TITLE			Chan	ga 🗖 Addition
NAME			2.2 NAME	1		L Crian	ige 🔲 Addition
STREET ADDRESS			2.3 STREE	et adoress			
CITY-ST-ZIP			2.4 CHY-	-ST ZIP			
TITLE		☐ DELETE	3 1 TI*LE			☐ Chan	ge 🗍 Addition
NAME			3.2 NAME	:			_
STREET ADDRESS			3.3 S*R6	ET ADDRESS			
CIT++ST-ZIP TITLE			3.4 CITY -	S1 - ZIP			
NAME		☐ DEFEL€	4 1 Tille			Cnan	ge 🔲 Addition
STREET ADDRESS			4.2 NAME				
CiTY-ST-ZIP				ET ADDRESS			
TITLE		DELETE	4 4 City -				
IAME			5 1 TUTLE 5 2 MANU			☐ Chani	ge 🔲 Addition
STREET ADDRESS			5.2 NAME	T ADDRESS			
DITY-ST-ZIP			5.4 City :				
TIFLE		☐ DELETE	6 1 7/16			[] Chan	10. El Addition
NAME			6.2 NAME			☐ Chang	ge 🔲 Addition
STREET ADDRESS			4	* ADDRESS			}
OTY-ST-ZiP	y that the information supplied w		EARLY S	1			

certify that the information indicated on this annual report or supplemental animaled and does not qualify for the exemption stated in Section 119.07(3)iii), Florida Statutes I further certify that the information indicated on this annual report or supplemental animal report is true and accurate and that my signature shall have the same legal effect as if made under appears in Block 12 or Block 17 if ghanned, or on an adventment with an address.

SIGNATURE: 7

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