

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P95000058732 (5)

1. Corporation Name  
CALOOSA PLUMBING, INC.



Principal Place of Business  
7141 TWIN EAGLE LANE  
FORT MYERS FL 33912

Mailing Address  
7141 TWIN EAGLE LANE  
FORT MYERS FL 33912

3. Date Incorporated or Qualified  
07/28/1995

3a. Date of Last Report

2. Principal Place of Business  
21 2350 Crystal Road

2a. Mailing Address  
26 2350 Crystal Road

4. FEI Number  
65-0599256

Applied For  
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

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

City & State

City & State

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

23 Fort Myers, FL

28 Fort Myers, FL

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

24 Zip 33907 25 Country USA

29 Zip 33907 30 Country USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KAYUSA, MICHAEL F  
1922 VICTORIA AVENUE  
SUITE A  
FORT MYERS FL 33901

81 Name Barbara Bates

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

7141 Twin Eagle Lane

83

84 City Fort Myers

FL 85 Zip Code 33912

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligation of, Section 607.0505, Florida Statutes.

SIGNATURE ☒ *Juan Rosario*

(NOTE: Registered Agent signature required when recording)

DATE

4/8/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD  
NAME ROSARIO, JUAN  
STREET ADDRESS 7141 TWIN EAGLE LANE  
CITY-ST-ZIP FORT MYERS FL 33912 ☐ DELETE

1.1 TITLE Director  
1.2 NAME Gerard A. McHale, Jr.  
1.3 STREET ADDRESS 8191 College Parkway #310  
1.4 CITY-ST-ZIP Fort Myers, FL 33919 ☐ Change ☒ Addition

TITLE VSTD  
NAME BATES, BARBARA  
STREET ADDRESS 7141 TWIN EAGLE LANE  
CITY-ST-ZIP FORT MYERS FL 33912 ☐ DELETE

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: ☒

*Barbara D Bates*  
Barbara D Bates

3/20/96 941-278-1111

Date

Daytime Phone

CR2E034 (12/95)

4-12-96