FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600005560 (3)

BAKER AND SONS PLUMBING CORP.

Principal Place of Business

Mailing Address

655 LAKE WELLINGTON DRIVE WELLINGTON FL 33414

655 LAKE WELLINGTON DRIVE WELLINGTON FL 33414-7969

FILED Jan 23 1997 8:00am Secretary of State



					3. Date Incorporated or Qualified	3a. Date of Last R	eport	
2. Principal Pl	ace of Business 9 S.W.30th aAve	2a. Mailing Address	30th Av	 3	01/18/1996 4. FEI Number 65-063666	3 Ar	oplied For	
Suite, Apt #, etc Suite, Apt. #, etc. 22 Suite #17-20 Suite #17-			7-20		5. Certificate of Status Desired	\$8.75	Additional equired	
City & State			each. F1		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Country	Zip	Country 30 USA		8. This corporation has liability for			
24 3 3 4 2 6 25 USA 29 3 3 4 2 6 30 9. Name and Address of Current Registered Agent					10. Name and Address of New Re	<u> </u>		
THE	LAW FIRM OF LAWRENCE J S	PIEGEL CHRTD	81 Na	81 Name DENNIS BAKER				
343 ALMERIA AVENUE				82 Street Address (P.O. Box Number is Not Acceptable)				
CORAL GABLES FL 33134				655 Lake Wellington Drive				
					11ington, F1 3341		0-4-	
			84 Cit	ั พ.	ellington		Code	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statut	es, the above-nar	ned corp	poration submits this statement for the prior submits this statement for the prior submits the prior s	ourpose of changing h	s registered	
agent. La	m familiar with, and accept the oblig	ations of, Section 607.0505, Fl	orida Statutes.	. ^		or the appointment do	, og otorea	
SIGNATURE	(lemo	alsalin 1	E: Registered Agent sign	· (34	KER PRESIDENT	1/16/97		
12.		D DIRECTORS	13.	atura regun	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTOR	RS IN 12	
TITLE	PD	DELETE	1.1 TITLE			☐ Change	☐ Addition	
NAME	BAKER, DENNIS A		1.2 NAME					
STREET ADDRESS	655 LAKE WELLINGTON DRIV	Έ	1.3 STREET ADDR	ess				
CITY-ST-ZIP	WELLINGTON FL 33414		1.4 CITY - ST - ZIP	1			Ì	
TITLE	VD	DELETE	2.1 TITLE			Change	Addition	
NAME	Baker, Philip F		2 2 NAME					
STREET ADDRESS	655 LAKE WELLINGTON DRIV	E	2.3 STREET ADDR	:ss			i	
CITY-ST-ZIP	WELLINGTON FL 33414		2. 4 CITY-ST-ZIP					
TITLE	SD	☐ DELETE	3.1 TITLE			☐ Change	Addition	
NAME	POTESTA, PATRICIA J	_	3.2 NAME					
STREET ADDRESS	855 LAKE WELLINGTON DRIV	E	3.3 STREET ADOR	ESS				
CITY-ST-ZIP	WELLINGTON FL 33414		3.4. C/TY - ST - Z/P	\rightarrow				
TITLE		☐ DELETE	4.1 TITLE)	D (for Director)	L_ Change	Addition	
NAME	POTESTA, RUDOLPH M		4 2 NAME	Ţ			ļ	
STREET ADDRESS	655 LAKE WELLINGTON DRIV	E	4.3 STREET ADDA	ESS				
CITY-SI-ZIP	WELLINGTON FL 33414	DELETE	4.4 CITY-ST-ZIP 5.1 TITLE			Change	Addition	
TITLE		☐ bereig				La sually	Addition	
NAME			5 2 NAME					
STREET ADDRESS			5.3 STREET ADDR	:55				
DITY-ST-7:P		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE	\dashv		Change	Addition	
NAME		C PECET	62 NAME			Onungo		
STREET ADDRESS			63 STREET ADDR	ree			1	
			6.4 CITY - ST - ZIP	.00				
CITY-ST-ZIP			64 UTTY-ST-ZIP		d in Continue 110 07/2Vi). Elevide Statute			

I do 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 annual report is 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 comporation 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 12 or on an attachment with an address.

SIGNATURE:

WUBAM DENNIS A. BAKER