

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

FILED

Apr 09 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000096985 (2)**

1. Corporation Name

NORTH STAR PLUMBING OF TENNESSEE, INC.



Principal Place of Business 1111 7TH AVE. VERO BEACH FL 32967	Mailing Address 1111 7TH AVE. VERO BEACH FL 32960-5722
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2. Principal Place of Business 21 1131 7th Avenue Suite, Apt. #, etc. 22 Suite B City & State 23 Vero Beach, FL Zip 24 2960 Country 25 USA		2a. Mailing Address 26 P.O. Box 883 Suite, Apt. #, etc. 27 City & State 28 Vero Beach, FL Zip 29 32961-0883 Country 30 USA		3. Date Incorporated or Qualified 11/22/1996	3a. Date of Last Report
		4. FEI Number 59-3410504		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent ALEX, DONALD 1111 7TH AVE. VERO BEACH FL 32967		10. Name and Address of New Registered Agent 81 Name Donald L. Alex 82 Street Address (P.O. Box Number is Not Acceptable) 3000 SE Waaler Street 83 84 City Stuart FL 85 Zip Code 34997	
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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 obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MEEKS, RONALD E	1.2 NAME	
STREET ADDRESS	485 38TH AVE.	1.3 STREET ADDRESS	
CITY-ST-ZIP	VERO BEACH FL 32968	1.4 CITY-ST-ZIP	
TITLE	STD	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MOBLEY, CRAIG M	2.2 NAME	ST
STREET ADDRESS	4245 60TH COURT	2.3 STREET ADDRESS	Craig M. Mobley
CITY-ST-ZIP	VERO BEACH FL 32967	2.4 CITY-ST-ZIP	6960 41st Street
TITLE	VD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ALEX, DONALD	3.2 NAME	
STREET ADDRESS	3000 SE WAALER STREET	3.3 STREET ADDRESS	Vero Beach, FL 32967
CITY-ST-ZIP	STUART FL 32997	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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: **Donald L. Alex** 3-24-97 561-567-5223
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0001187

CR2E034 (9/96)