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

**PROFIT CORPORATION** ANNUAL REPORT

1**9**98

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-7IP

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra D. Mortham

Socretary of State DIVISION OF CORPORATIONS

P97000051241 DOCUMENT #

BOBBY'S PLUMBING, INC. OF VOLUSIA COUNTY

Principal Place of Business Mailing Address 210 AVON COURT 1539 CENTER AVENUE PORT ORANGE FL 32127 HOLLY HILL FL 32117-2021 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/10/1997 Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-834 3977 21 26 Not Applicable Suite, Apt #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country 200 Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes e, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MASTERS, JOHN M 1539 CENTER AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) HOLLY HILL FL 32117-2021 83 84 City 85 Zip Code 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 registored agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or pointed harde of registered ago of and frient applicable (NO1): Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE THILE 11 DILE Change **BROWN, ROBERT L JR.** NAME 1.2 NAME 210 AVON COURT STREET ADDRESS 1.3 STREET ADDRESS PORT ORANGE FL 32127 CITY-ST-ZIP 1.4 CITY-ST-7IP DELITE TITLE 2.1 HILE Change ■ Addition **B**ROWN, MAUREEN V NAME 2.2 NAME 210 AVON COURT STREET ADDRESS 2.3 STREET ADDRESS **PORT ORANGE FL 32127** CITY-ST-ZIP 2. 4 CITY-S1-ZIP TITLE DELETE 3 1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3 4 CITY-S1-ZIP DELETE TITLE 4.1 TITLE Char Addition NAME 4 2 NAME STREET ADDRESS 4 3 STREET ADDRESS CITY-ST-ZIP 44 CITY-ST-ZIP TITLE 🔲 DELFTE 51 TITLE ☐ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS

6.4 CITY - ST - ZIP 14. Thereby 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 armual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated on this armual report or supplied with the information indicated on this armual report or supplied with the information indicated on this armual report or supplied with the information indicated on this armual report or supplied with the information indicated on this armual report or supplied with the information indicated on this armual report or supplied with the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certificated in Section 119.07(3)(iii), Florida Statutes. I further certificated in Section 119.07(

5.4 CiTY-ST-ZIP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

DODERT I. BROWN, IR PRES

DELFTE

1998 APR 20

\*\*\*150.00

Change

D6/23/33---01092---007

Addition

FILED

Jun 22 1998 8:00am

Secretary of State