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

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P97000071583

1. Corporation Name

DON CARTER PLUMBING, INC.

Principal Place of Business

P.O. BOX 735 CALLAHAN FL 32011 Mailing Address

P.O. BOX 735 CALLAHAN FL 32011

## Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90192 027 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

Suite, Apt. 8, etc.    Suite, Apt. 8, etc.							00/10/199/			
Suite, Apt. 4, efc.    Suite, Apt. 4, efc.	2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		Applied For	
Suite, Apt. 4, efc.    Suite, Apt. 4, efc.	21 7	Th v 775	26 P. O. TX	14 7J	15		59-3437903		Not Applicable	
CINK State 23		#, etc.	Suite, Apt. #, etc.	- A				\$8.7	5 Additional	
City Starle  23	22		<del></del>				5. Certificate of Status Desired	Fee	Required	
Added to Fees   Country   Zip   Zip   Country   Zip   Zip   Country   Zip   Zip   Country   Zip							6: Flection Campaign Financing —	\$5 (	00 May Be	
Country   Zp	_ ~ 1	ichen Fl		Ŧl						
22   29   29   29   30   1   30   Personal Property Tax.   Yes   No    9. Name and Address of Current Registered Agent   10. Name and Address of New Registered Agent    CARTER, DONALD H JR. 2553 BARBBR ROAD   2553 BARBBRR ROAD   2553 BARBBRR ROAD   2553 BARBBRR ROAD   2553 BARBBRR ROAD   2553 BARB					ntrv					
3. Name and Address of Current Registered Agent  CARTER, DONALD H JR. 2582 BARBSR ROAD CALLAHAN FL 32011  10. Name and Address of New Registered Agent  CALLAHAN FL 32011  12. Solid provisions of Sections 607 0502 and 607 1508, Florida Statutes. The above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. The above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. The above-named 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  SIGNATURE  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. NAME  CARTER, DON  12. NAME  CALLAHAN FL 32011  TIME  OBLETE  21 TIME  OBLETE  31 TIME  OBLETE  31 TIME  OBLETE  41 TIME  OBLETE  31 TIME  OBLETE  31 TIME  OBLETE  41 TIME  OBLETE  41 TIME  OBLETE  41 TIME  OBLETE  31 TIME  OBLETE  31 TIME  OBLETE  31 TIME  OBLETE  31 TIME  OBLETE  OCHANGE	_ ^ .	,			,,,,		· · · · · · · · · · · · · · · · · · ·		□No	
CARTER, DONALD H JR. 2563 BARBBR ROAD CALLAHAN FL 32011  82  Street Address (P.O. Box Number is Not Acceptable)  83  84  City  FL  85  Zip Code  11. Pursuant to the provisions of Socions 607 0502 and 507,1508. Fioridal Statutes, the above-named corporation submits this statement for the purpose of changing its 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, and accept the obligations of, Section 607 0505, Floridal Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  OFFICERS AND DIRECTORS  12.  OFFICERS AND DIRECTORS  13.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  D  CARTER, DON  12.  TITLE  D  CARTER, DON  13.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  D  CARTER, DON  15.  SIGNATURE  SIGNATURE  SIGNATURE  D CARTER, DON  15.  SIGNATURE  SIGNATURE  D CARTER, DON  15.  SIGNATURE  D CARTER, DON  15.  SIGNATURE  SIGNATURE  D CARTER, DON  15.  SIGNATURE  SI										
CARTER, DONALD H JR. 2563 BARBBR ROAD CALLAHAN FL 32011  82   Street Address (P.O. Box Number is Not Acceptable)  83   Ed   City   FL   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 agent. an affailiar with, and accept the obligations of, Section 607 0505, Florida Statutes, the above-named 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 Signitus. Injurior of registered agent, and registered agent to am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes.  SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  14. CITY ST. 2P  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  16. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  20. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  21. TITLE  22. ANAME  23. TITLE  24. CITY ST. 2P  25. ADDITIONS/CHANGES TO O	9. Name and Address of Current Registered Agent					Nomo	10. Name and Address of New Registered	Agent		
2563 BARB®R ROAD CALLAHAN FL 32011  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 lis 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 directors and accept the appointment as registered directors. I hereby accept the appointment as registered directors	CARTER DONALD H. ID					Name				
CALLAHAN FL 32011  85 City						82 Street Address (P.O. Box Number is Not Acceptable)				
11. Pursuant to the provisions 607 0502 and 507 1508. Ficrida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Statutes, significantly agent, and tamiliar with, and accept the obligations of, Section 607 0505, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TILE  OBLETE  11 TILE  OBLETE  11 TILE  OBLETE  21 TILE  OCHange  Addition  Addition  NAME  STREET ADDRESS  CITY-51-2P  TILE  OBLETE  13 TILE  OBLETE  31 TILE  OCHange  Addition  Addition  Addition  Addition  Addition  Addition  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TILE  OCHANGE  Addition  Addition  Addition  Addition  Addition  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TILE  OCHANGE  Addition  Addition  Addition  Addition  Addition  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TILE  OCHANGE  Addition  Addition  Addition  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TILE  OCHANGE  Addition  Addition  Addition  Addition  Addition  Addition  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TILE  OCHANGE  Addition  Addition  Addition  Addition  Addition  Addition  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TILE  OCHANGE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TILE  OCHANGE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TILE  OCHANGE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  ADDITIONS/CHANGES TO O										
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Signifum, Typed or printed rame of regulated edgered and title of applicables   (NOTE Registered Agent signature required when intersibility)   DATE	agent. I a	m familiar with, and accept the oblig	jations of, Section 607.0505,	Florida Stat	utes.					
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TITLE	SIGNATURE			IOTE: Registered	Agen	t signature require	·			
Table	12.	OFFICERS A				<del> </del>	ADDITIONS/CHANGES TO OFFICERS A			
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CITY-ST-ZIP	NAME			1		}				
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### STREET ADDRESS ### #### ##########################							أستراني شراب مينهم			
CITY-ST-ZIP							. ~			
TITLE         DELETE         5.1 TITLE         Change         Addition           NAME         52 NAME           STREET ADDRESS         5.3 STREET ADDRESS           CITY-ST-ZIP         5.4 CITY-ST-ZIP           TITLE         DELETE         6.1 TITLE           NAME         ,         6.2 NAME           STREET ADDRESS         6.3 STREET ADDRESS	STREET ADDRESS			4.3 S	REET	ADDRESS				
NAME	CITY-ST-ZIP				TY-ST	T-ZIP				
STREET ADDRESS	TITLE		☐ DELETE	5.1 TI	ΠE	ļ		Chan	ige ∐ Addition	
STREET ADDRESS	NAME			5.2 N	AME					
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	CITY-ST-ZIP		·	6.4 C	TY-S1	T- ZIP				

14. I 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 chapted, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**