

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000079640

1. Entity Name
SPENGLER PLUMBING SERVICE, INC.

FILED
Mar 07, 2001 8:00 am
Secretary of State

03-07-2001 90620 013 ***158.75

Principal Place of Business
**1133 INDUSTRIAL BLVD
UNIT C-18
NAPLES FL 34104**

Mailing Address
**75 KIRTLAND DR.
NAPLES FL 34110**

2. Principal Place of Business
**4282 Progress Ave
Suite, Apt. #, etc.
#31**

3. Mailing Address
Suite, Apt. #, etc.

City & State
Naples, FL
Zip
34104

City & State

Zip

Country
US

Country

4. FEI Number **59-3467613**

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BUTERA, TERRY R
75 KIRTLAND DR
NAPLES FL 34110**

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so.
(See criteria on back) ☒

**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State**

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PS
BUTERA, TERRY R
75 KIRTLAND DR.
NAPLES FL 34110** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VS
PHILLIPPI, DAVID M
520 25 ST., NW
NAPLES FL 34120** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VS
Phillippi, David M.
683 25th Street NW
Naples, FL 34120** ☒ Change only ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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☐ Delete

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☐ Change ☐ Addition

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CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

TERRY R. BUTERA

Mar. 5 2001

(941) 597-2301

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0398145

CR2E034 (10/00)