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PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Jul 08, 1999 8:00 am  
Secretary of State

07-08-1999 90019 022 \*\*\*550.00

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1. Corporation Name

G M PLUMBING & PIPING COMPANY

Principal Place of Business

1700 POMPANO DR., SE  
ST. PETERSBURG FL 33705

Mailing Address

3700 POMPANO DR., SE  
ST. PETERSBURG FL 33705

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/26/1997

4. FEI Number

~~59-2884799~~ 59-3486305

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

☐

Yes ☐ No

2. Principal Place of Business

1 Suite, Apt. #, etc.

3 City & State

4 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

EARLE, RICHARD T III  
111 2ND AVE. NE, SUITE 1401  
ST. PETERSBURG FL 33701

10. Name and Address of New Registered Agent

81 Name

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

83

84 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 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

1. TITLE P ☐ DELETE

AME JAMES, MANAFFEY J W  
STREET ADDRESS 731 JAMESTOWN DR  
CITY-ST-ZIP WINTER PARK FL 32792

1. TITLE V ☐ DELETE

AME GRAY, THOMAS F  
STREET ADDRESS 4000 42ND AVE S.  
CITY-ST-ZIP ST. PETERSBURG FL 33705

1. TITLE ST ☐ DELETE

AME MANAFFEY, MARK T  
STREET ADDRESS 3700 POMPANO DR S.E.  
CITY-ST-ZIP ST. PETERSBURG FL 33705

1. TITLE ☐ DELETE

AME  
STREET ADDRESS  
CITY-ST-ZIP

1. TITLE ☐ DELETE

AME  
STREET ADDRESS  
CITY-ST-ZIP

1. TITLE ☐ DELETE

AME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

4. 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Thomas F. Gray*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

THOMAS F. GRAY  
V.P.

Date

(727) 898-4999

Daytime Phone #

CR2E034 (1/98)

0406713