2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

## Mar 11, 2002 8:00 am Secretary of State P98000097800 **DOCUMENT #** 1. Entity Name 03-11-2002 90073 015 \*\*\*150.00 DRC PLUMBING, INC. Mailing Address Principal Place of Business 1452 MYRTLE AVE. 1452 MYRTLE AVE. LIVE OAK FL 32060 LIVÉ OAK FL 32060 2. Principal Place of Business 3. Mailing Address 2932 <u>P.O. Box</u> Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number City & State 59-3543482 Not Applicable \$8.75 Additlonal 5. Certificate of Status Desired $\Box$ Fee Required WANNER wannee 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CARTER, DANIEL R Street Address (P.O. Box Number is Not Acceptable) 1452 MYRTLE AVE. LIVE OAK FL 32060 Zio Code City FL 4. 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 (NOTE: Registered Agent alignature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. (9/01) Addition Delete TITLE TITLE CARTER, DANIEL R NAME NAME 12932 92Nd PASS CR2E034 STREET ADDRESS 1452 MYRTLE AVE. STREET ADDRESS LIVE OAK FL 32060 CITY-ST-ZIP CITY-ST-ZIP Delete Addition | TITLE TITLE NAME CARTER, KAREN S NAME 12932 92 Nd PASS STREET ADDRESS 1452 MYRTLE AVE STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP LIVE OAK FL 32060 Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition TITLE TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition Delete TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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

FILED

February 4, 2002

DRC PLUMBING, INC. P O BOX 1149 LIVE OAK, FL 32064

Subject: DRC PLUMBING, INC.

-Reference-Number: P98000097800

Please be advised, we have received your annual report/uniform business report; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Secretary of State

Please sign and return your check submitted with the annual report/uniform business report.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/gs ANNUAL REPORTS SECTION