2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P9900029907 1. Entity Name EMERALD PLUMBING OF CENTRAL FLORIDA, INC					FILED Jan 28, 2000 8:00 am Secretary of State 01-28-2000 90080 026 ***150.00		
Principal Place of Business Mailing Address							
123 Dover Ro Inter Park I		1823 DOVER ROAD WINTER PARK FL 32792-2103					
		•					
	enderson Drive	3. Mailing Address	. Mailing Address 311 Henderson Drive				NAN INN INN
Suite, Apt. #		Suite, Apt. #, etc.			DO NOT WRI	TE IN THIS SPACE	
City & State		City & State		4.	4. FEI Number 59 ~ 3567393 Applied For Not Applicable		
	ando FL	Zip Country				¢8.75 .	Not Applicable
<u>2806</u>	-2473	32806-2473			Certificate of Status Desired	Fee Requi	
	6. Name and Address of Current	Registered Agent	Name	7. 1	Name and Address of New I	Registered Agent	
	DY, WILLIAM	alaren ha #A	Street	Address (P.O. E	Box Number is Not Acceptabl		
1620 DOVER ROAD 2311 Henderson Dr. #A WINTER PARK FL 32792 Orlando, FL 32806-247				13			
There are a construction of the construction o			City			El Zip Co	
				Lered office or registered agent, or both, in the State of Florida.			
•	a on back) OFFICERS AND	After MAY 1, 2000 Make Check Payable DIRECTORS		nt of State	Trust Fund Contributio		ed to Fees
tle Ame Treet address TY-ST-ZIP	D CUDDY, WILLIAM 1823 DOVER ROAD WINTER PARK FL 32792	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Henderson Dr.N do, FL 32806		e 🗌 Addition
TLE Ame Ireet address Ity-st-zip	PST CUDDY, WILLIAM 1823 DOVER ROAD WINTER PARK FL 32792	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	2311 1	lenderson brivi 200, FL 32801	K Change 2 [#] A	e 🗋 Addition
'LE Me Reet address IY-ST-ZIP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Chang	e 🔲 Addition
ILE ME REET ADORESS IY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Addition
TLE IME REET ADDRESS		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	e 🗌 Addition
IY-ST-ZIP ILE IME REET ADDRESS IY-ST-ZIP	 ••	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Chang	e 🗌 Addition
3. I hereby c indicated of the corr	ertify that the information supplied with on this report or supplemental report is boration or the receiver or trustee empo or on an attachment with an address, the URE:	true and accurate and that my wered to execute this report as	he exemption st r signature shall s required by Ch	have the same	legal effect as it made under ida Statutes; and that my nan	r oath, that I am an ottic	er or director or Block 12 if