

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000052513

1. Entity Name

GEORGE LAGASSE PLUMBING, INC.

FILED
May 24, 2000 8:00 am
Secretary of State

05-24-2000 90037 018 ***150.00

Principal Place of Business

357 6TH AVENUE WEST
 BRADENTON FL 34203

Mailing Address

357 6TH AVENUE WEST
 BRADENTON FL 34205-8820

2. Principal Place of Business

1113 12th St. West

3. Mailing Address

1113 12th St. W

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Palmetto, FL.

City & State

Palmetto, FL.

4. FEI Number

65-0926892

Applied For

Not Applicable

Zip

34221

Country

Manatee

Zip

34221

Country

Manatee

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

LAGASSE, GEORGE JR.
 357 6TH AVENUE WEST
 BRADENTON FL 34203

7. Name and Address of New Registered Agent

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

George LaGasse

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

(NOTE: Registered Agent signature required when reinstating)

4-1-00

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, 2000 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

TITLE D ☐ Delete
 NAME LAGASSE, GEORGE JR.
 STREET ADDRESS 635 WEST 11TH AVE.
 CITY-ST-ZIP PALMETTO FL 34221

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Change ☐ Addition
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 CITY-ST-ZIP

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:

George LaGasse

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GEORGE LA GASSE

4-1-00

Date

941-726-2381

Daytime Phone #