

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000082064

**Entity Name:** CENTERSTATE PLUMBING SERVICES, LLC

**Current Principal Place of Business:**

3615 CENTURY BOULEVARD  
SUITE #3  
LAKELAND, FL 33811

**Current Mailing Address:**

PO BOX 6951  
LAKELAND, FL 33807-6951

**FEI Number:** 37-1611198

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

FOWLER, WILLIAM J  
3023 BELLFLOWER WAY  
LAKELAND, FL 33811 US

*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:**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGRM	Title	MGRM
Name	FOWLER, WILLIAM J	Name	FOWLER, JOSHUA D
Address	3023 BELLFLOWER WAY	Address	4617 ESSEX AVENUE
City-State-Zip:	LAKELAND FL 33811	City-State-Zip:	LAKELAND FL 33813

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** WILLIAM J FOWLER

MGRM

05/23/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date