2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 619860

FILED Jan 25, 2007 Secretary of State

Entity Name: BUTLER PLUMBING OF GAINESVILLE, INC.

| urrent P | Principal Place | of Business: | New Principal Place | OT Business: |
|---|--|--|---|---|
| | 61 TERRACE RY, FL 32669 | US | | |
| Current Mailing Address: | | New Mailing Address: | | |
| 29 SW 1 EWBER | 61 TR RY, FL 32669 | US | | |
| El Number | r: 59-1921364 | FEI Number Applied For() | FEI Number Not Applicable () | Certificate of Status Desired () |
| ame and | d Address of C | urrent Registered Agent: | Name and Address | of New Registered Agent: |
| 29 SW 1 | ANNETTE G. 61 TERRACE | | | |
| FWREK | RY, FL 32669 | US | | |
| he above | · | | ourpose of changing its registere | ed office or registered agent, or both, |
| he above | e named entity s e of Florida. RE: | ubmits this statement for the p | | ed office or registered agent, or both, |
| he above the Stat IGNATU | e named entity s e of Florida. RE: Electroni | ubmits this statement for the positions of the positions of Registered Agree 100 and 100 are 1 | | ed office or registered agent, or both, Date |
| he above the Stat IGNATU | e named entity s e of Florida. RE: Electroni mpaign Financing | ubmits this statement for the position of the position of Registered Agrand Contribution (). | ent | Date |
| he above the Stat IGNATU | e named entity s e of Florida. RE: Electroni | ubmits this statement for the position of the position of Registered Agrand Contribution (). | ent | |
| he above the Stat IGNATU | e named entity see of Florida. RE: Electroni mpaign Financing | ubmits this statement for the particle of Registered Agrand Trust Fund Contribution (). **CORS:** Delete RT A.(CH, RMN. RRACE | ent | Date |
| he above the Stat IGNATU ection Ca FFICER ttle: ame: ddress: | e named entity s e of Florida. RE: Electroni mpaign Financing S AND DIRECT PTD () BUTLER, ROBE 629 SW 161 TEI NEWBERRY, FL | ubmits this statement for the particle of Registered Agrand Contribution (). TORS: Delete RT A.(CH, RMN. RRACE . 32669 US Delete TE G., RRACE | ent ADDITIONS/CHANG Title: Name: Address: | Date ES TO OFFICERS AND DIRECTOR |

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANNETTE G. BUTLER S 01/25/2007