2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2009
Secretary of State

DOCUMENT# F07000002034

Entity Name: W & W PLUMBING, INC.

Current Principal Place of Business:

201 TARPON ST
PORT SAINT JOE, FL 32456

New Principal Place of Business:

Current Mailing Address:

P O BOX 490
PORT SAINT JOE, FL 32457

New Mailing Address:

FEI Number: 58-2233497 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WHITEN, LESTER
201 TARPON ST
PORT SAINT JOE, FL 32312 US

Name and Address of New Registered Agent:

WHITEN, LESTER
201 TARPON ST
PORT SAINT JOE, FL 32456 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: 04/24/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: CP ( ) Delete
Name: WHITEN, LESTER
Address: 201 TARPON ST
City-St-Zip: PORT SAINT JOE, FL 32456

Title: VCS ( ) Delete
Name: WHITEN, SUSAN
Address: 201 TARPON ST
City-St-Zip: PORT SAINT JOE, FL 32456

Title: V ( ) Delete
Name: WHITEN, STEPHEN
Address: 201 TARPON ST
City-St-Zip: PORT SAINT JOE, FL 32456

Title: T ( ) Delete
Name: WHITEN, GRANT
Address: 201 TARPON ST
City-St-Zip: PORT SAINT JOE, FL 32456

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: SUSAN WHITEN VCS 04/24/2009
Electronic Signature of Signing Officer or Director — Date