

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G54850

FILED
Mar 23, 2005
Secretary of State

Entity Name: DAVID GRAY PLUMBING, INCORPORATED

Current Principal Place of Business:

8850 CORPORATE SQUARE CT.
JACKSONVILLE, FL 32216 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 11303
JACKSONVILLE, FL 32239 US

New Mailing Address:

FEI Number: 59-2480329

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AKEL, DANIEL D
ONE INDEPENDENT DR., STE. 2301
JACKSONVILLE, FL 32202 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GRAY, DAVID,
Address: 8850 CORPORATE SQUARE CT.
City-St-Zip: JACKSONVILLE, FL 32216

Title: VD () Delete
Name: ROSS, MAJOR N JR
Address: 3308 SEQUOYAH CIR
City-St-Zip: JACKSONVILLE, FL 32259

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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 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: DAVID F GRAY

PRES

03/23/2005

Electronic Signature of Signing Officer or Director

Date