

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000042198

**FILED**  
**Apr 04, 2011**  
**Secretary of State**

**Entity Name:** JAMES K. MCSTRAVIC PLUMBING, INC.

**Current Principal Place of Business:**

17220 PLEASURE ROAD  
CAPE CORAL, FL 33909 US

**New Principal Place of Business:**

**Current Mailing Address:**

17220 PLEASURE ROAD  
CAPE CORAL, FL 33909 US

**New Mailing Address:**

FEI Number: 65-0504027

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MCSTRAVIC, JAMES K  
17220 PLEASURE ROAD  
CAPE CORAL, FL 33993 US

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

MCSTRAVIC, JAMES K  
17220 PLEASURE ROAD  
CAPE CORAL, FL 33993 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

04/04/2011

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: MCSTRAVIC, JAMES K  
Address: 17220 PLEASURE ROAD  
City-St-Zip: CAPE CORAL, FL 33909

Title: DVST  
Name: MCSTRAVIC, LINDA  
Address: 17220 PLEASURE ROAD  
City-St-Zip: CAPE CORAL, FL 33909

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 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 all other like empowered.

SIGNATURE: JAMES K. MCSTRAVIC

Electronic Signature of Signing Officer or Director

PRES

04/04/2011

Date