

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000070684

**Entity Name:** ARTESIAN PLUMBING INC

**Current Principal Place of Business:**

1139 SOUTH LOOP BLVD  
LEHIGH ACRES, FL 33936

**Current Mailing Address:**

1139 SOUTH LOOP BLVD  
LEHIGH ACRES, FL 33936 US

**FEI Number:** 27-3326571

**Certificate of Status Desired:** No

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

ERBES, NEAL E  
1139 SOUTH LOOP BLVD  
LEHIGH ACRES, FL 33936 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:** NEAL E ERBES

04/30/2015

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name ERBES, NEAL  
Address 21443 MANATEE AVENUE  
City-State-Zip: PORT CHARLOTTE FL 33952

Title VP  
Name PATTERSON, JOHN WILLIAM  
Address 21973 BUXTON AVE  
City-State-Zip: PORT CHARLOTTE FL 33952

Title EXECUTIVE SECRETARY  
Name SCHAROUN, RUPERT  
Address 3082 MAUCK TERR  
City-State-Zip: PORT CHARLOTTE FL 33981

*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:** NEAL ERBES

PRESIDENT

04/30/2015

Electronic Signature of Signing Officer/Director Detail

Date