

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 150103

FILED  
Apr 08, 2008  
Secretary of State

Entity Name: DIRECT PLUMBING SUPPLIES, INC.

**Current Principal Place of Business:**

2911 N PALAFOX ST  
PENSACOLA, FL 32501

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2100  
PENSACOLA, FL 32513

**New Mailing Address:**

FEI Number: 59-0581544

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ROSENBAUM, EUGENE  
2911 NORTH PALAFOX STREET  
PENSACOLA, FL 32501 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: VD ( ) Delete  
Name: ROSENBAUM,JOE,  
Address: 1409 SOUNDVIEW TRAIL  
City-St-Zip: GULF BREEZE, FL 32561

Title: PSTD ( ) Delete  
Name: ROSENBAUM,GENE,  
Address: 220 LESTARBOARD DRIVE  
City-St-Zip: PENSACOLA, FL 32561

**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 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: GENE ROSENBAUM

PRES

04/08/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date