## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 203432**

City-St-Zip: SARASOTA, FL 34239

Entity Name: ARROW PLUMBING CORPORATION

FILED Jan 12, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
2180 9TH S SARASOT	ST A, FL 34237				
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
2180 9TH ST SARASOTA, FL 34237					
FEI Number: 59-0812522		FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
	TH GATE CIR A, FL 34239	US			
The above in the State		bmits this statement for the pu	rpose of changing its registere	ed office or registered agent, or both,	
SIGNATUR	RF.				
0.0.0.		Signature of Registered Agen	t	 Date	
Election Can		Trust Fund Contribution ( ).	•	Bato	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CD () D TUCKER, LESLIE 2180 9TH STREE SARASOTA, FL		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	PD () D FOXWORTHY, RO 2180 CORNELY S SARASOTA, FL 3	ST	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	STD () D ERB, C W 3230 SOUTH GAT SARASOTA, FL 3		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	MD () D TUCKER, SUSAN 2180 9TH STREE SARASOTA, FL 3	T	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	VP () C PAYNE, WILLIAW 1836 BAHIA VIST		Title: Name: Address:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip:

SIGNATURE: WILLIAM G. PAYNE VP 01/12/2006