

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 238162

FILED  
Apr 13, 2007  
Secretary of State

Entity Name: EAGERTON PLUMBING CO., INC.

## Current Principal Place of Business:

HILDA J. EAGERTON  
JACKSONVILLE, FL 32254

## New Principal Place of Business:

1093 NORTH MCDUFF AVE  
JACKSONVILLE, FL 32254

## Current Mailing Address:

HILDA J. EAGERTON  
JACKSONVILLE, FL 32254

## New Mailing Address:

1093 NORTH MCDUFF AVE  
JACKSONVILLE, FL 32254

FEI Number: 59-0904564

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

EAGERTON, HILDA J  
1528 BLAIR RD.  
JACKSONVILLE, FL 32221 US

## Name and Address of New Registered Agent:

CLARK, YVONNE  
1528 BLAIR RD.  
JACKSONVILLE, FL 32221 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: YVONNE CLARK

04/13/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: EAGERTON, HILDA J,  
Address: 1528 BLAIR RD.  
City-St-Zip: JACKSONVILLE, FL 32221

Title: S ( ) Delete  
Name: HELMS, SAMUEL,  
Address: 5560 OLIVER STREET N.  
City-St-Zip: JACKSONVILLE, FL 00000,

Title: VP ( ) Delete  
Name: CLARK, THOMAS E  
Address: 1518 BLAIR RD  
City-St-Zip: JACKSONVILLE, FL 32221

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: CLARK, YVONNE  
Address: 1528 BLAIR RD.  
City-St-Zip: JACKSONVILLE, FL 32221

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: EVP (X) Change ( ) Addition  
Name: CLARK, THOMAS E  
Address: 1518 BLAIR RD  
City-St-Zip: JACKSONVILLE, FL 32221

Title: VP ( ) Change (X) Addition  
Name: BAILEY, ANGELA  
Address: 1580 BLAIR ROAD  
City-St-Zip: JACKSONVILLE, FL 32221

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.

SIGNATURE: YVONNE CLARK

PD

04/13/2007

Electronic Signature of Signing Officer or Director

Date