2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 331808

WOLLITZ, MARK L

JACKSONVILLE, FL 32220

9323 ALMA ST

Name:

Address:

City-St-Zip:

Entity Name: DON HARRIS PLUMBING CO., INC.

FILED Jan 07, 2009 Secretary of State

Current P	rincipal Place o	f Business:	New Principal Place o	New Principal Place of Business:	
	IDING BOULEVA VILLE, FL 32210				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
PO BOX 14 JACKSON	4668 VILLE, FL 32210) US			
FEI Number:	59-1214195	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
HARRIS,NELSON D 4641 RAGGEDY POINT RD ORANGE PARK, FL 32003 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			ont	 Date	
Election Car		rust Fund Contribution ().	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () DO HARRIS,NELSON 4029 BLANDING E JACKSONVILLE, F	D, BLVD.	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	T () De HARRIS,NELSON 4029 BLANDING E JACKSONVILLE, F	D., BLVD.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () De HARRIS,ANITA J, 4029 BLANDING E JACKSONVILLE, F	BLVD.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	V ()D	elete	Title:	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: MARK WOLLITZ VP 01/07/2009