

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 362574

FILED
Aug 17, 2006
Secretary of State

Entity Name: CAPITAL PLUMBING INC

Current Principal Place of Business:

% STEPHENS
RT 3 BOX 457
CUTHBERT, GA 39840

New Principal Place of Business:

Current Mailing Address:

% STEPHENS
RT 3 BOX 457
CUTHBERT, GA 39840

New Mailing Address:

FEI Number: 59-1288802 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEPHENS, ANDREW
5634 NW 61 AVENUE, ROAD
SILVER SPRINGS, FL 34488 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: STEPHENS, BRADLEY F
Address: RT. 3 BOX 419
City-St-Zip: CUTHBERT, GA 39840

Title: STD () Delete
Name: STEPHENS, DOROTHY,
Address: RT 3 BOX 457
City-St-Zip: CUTHBERT, GA 39840

Title: VD () Delete
Name: SEPHENS, ANDREW N
Address: 5634 NS 61 AVE ROAD
City-St-Zip: SILVER SPRINGS, FL 34488

Title: T () Delete
Name: STEPHENS, KERRI RAE
Address: RT. 3 BOX 419
City-St-Zip: CUTHBERT, GA 39840

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: STD (X) Change () Addition
Name: STEPHENS, BRADLEY,
Address: RT 3 BOX 419
City-St-Zip: CUTHBERT, GA 39840

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 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: BRADLEY STEPHENS

PD

08/17/2006

Electronic Signature of Signing Officer or Director

_____ Date