

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 362574

FILED
Jan 09, 2009
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:

30 WARDS MILL RD
CUTHBERT, GA 39840

Current Mailing Address:

% STEPHENS
RT 3 BOX 457
CUTHBERT, GA 39840

New Mailing Address:

30 WARDS MILL RD
CUTHBERT, GA 39840

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

Election Campaign Financing Trust Fund Contribution ().

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, BRADLEY,
Address: RT 3 BOX 419
City-St-Zip: CUTHBERT, GA 39840

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

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: PD (X) Change () Addition
Name: STEPHENS, BRADLEY F
Address: 30 WARDS MILL RD
City-St-Zip: CUTHBERT, GA 39840

Title: STD (X) Change () Addition
Name: STEPHENS, BRADLEY,
Address: 30 WARDS MILL RD
City-St-Zip: CUTHBERT, GA 39840

Title: VD (X) Change () Addition
Name: STEPHENS, BRADLEY
Address: 30 WARDS MILL RD
City-St-Zip: CUTHBERT, GA 39840

Title: T (X) Change () Addition
Name: STEPHENS, KERRI RAE
Address: 30 WARDS MILL RD
City-St-Zip: CUTHBERT, GA 39840

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: KERRI RAE STEPHENS

T

01/09/2009

Electronic Signature of Signing Officer or Director

Date