

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 378271

FILED  
Feb 24, 2009  
Secretary of State

Entity Name: PLUMBING SERVICES BY GUS, INC.

## Current Principal Place of Business:

1422 PINEHURST RD  
DUNEDIN, FL 34698

## New Principal Place of Business:

168 BEECHWOOD DRIVE  
SAFETY HARBOR, FL 34695

## Current Mailing Address:

1422 PINEHURST RD  
P O BOX 9  
DUNEDIN, FL 346977009

## New Mailing Address:

168 BEECHWOOD DRIVE  
SAFETY HARBOR, FL 34695

FEI Number: 59-1346694

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HATCH, RAMONA G  
1422 PINEHURST ROAD  
DUNEDIN, FL 34698 US

## Name and Address of New Registered Agent:

HATCH, RAMONA G  
168 BEECHWOOD DRIVE  
SAFETY HARBOR, FL 34695 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: RAMONA G. HATCH

02/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: S ( ) Delete  
Name: REYNOLDS, AGNES D  
Address: 1114 S. MISSOURI AVE. #109  
City-St-Zip: CLEARWATER, FL 33756

Title: PTD ( ) Delete  
Name: HATCH, RAMONA G  
Address: 263 AMERICUS BLVD E. #55  
City-St-Zip: CLEARWATER, FL 33763

Title: D (X) Delete  
Name: BRITTON, BRIGITTE,  
Address: 1743 S. PINELLAS AVE.  
City-St-Zip: TARPON SPGS, FL

Title: VP (X) Delete  
Name: HATCH, WALTER W.,  
Address: 263 AMERICUS BLVD E. #55  
City-St-Zip: CLEARWATER, FL 33763

Title: VP (X) Delete  
Name: MCCALL, KEVIN C  
Address: 1006 ORCA COURT  
City-St-Zip: HOLIDAY, FL 34691

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change ( ) Addition  
Name: HATCH, WALTER W  
Address: 168 BEECHWOOD DRIVE  
City-St-Zip: SAFETY HARBOR, FL 34695 US

Title: PTD (X) Change ( ) Addition  
Name: HATCH, RAMONA G  
Address: 168 BEECHWOOD DRIVE  
City-St-Zip: SAFETY HARBOR, FL 34695 US

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

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 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: RAMONA G. HATCH

PTD

02/24/2009

Electronic Signature of Signing Officer or Director

Date