## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 413241** 

FILED Jan 09, 2006 Secretary of State

Entity Name: ALL-FLORIDA PLUMBING & ELECTRICAL SUPPLY CO

**Current Principal Place of Business: New Principal Place of Business:** % RICHARD & WANDA BEAZLEY 1670 NORTH NOVA ROAD DAYTONA, FL 32117 **New Mailing Address: Current Mailing Address:** % RICHARD& WANDA BEAZLEY 1670 NORTH NOVA ROAD DAYTONA, FL 32117 FEI Number: 59-1438186 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BEAZLEY, RICHARD 56405 HICKORY ROAD ASTOR, FL 32102 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition BEAZLEY, RICHARD I, Name: Name: 56405 HICKORY RD Address: Address: City-St-Zip: ASTOR, FL 32102 City-St-Zip: Title: VΡ Title: () Delete () Change () Addition Name: BEAZLEY, RICHARD II, Name: 3790 CARRICK DRIVE Address: Address: ORMOND BEACH, FL 32174 City-St-Zip: City-St-Zip: AVP Title: Title: () Delete () Change () Addition BEAZLEY, CLAYTON, Name: Name: 1670 N. NOVA ROAD Address: Address: City-St-Zip: DAYTONA BEACH, FL 32117 City-St-Zip: Title: ( ) Delete Title: () Change () Addition BEAZLEY, WANDA, Name: Name: Address: 56405 HICKORY RD. Address: City-St-Zip: ASTOR, FL 32102 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: CLAYTON BEAZLEY I AVP 01/09/2006