

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 459998

FILED  
Jan 07, 2009  
Secretary of State

Entity Name: GOLDEN X PLUMBING SUPPLIES, INC.

**Current Principal Place of Business:**

8 N FLA AVENUE  
INVERNESS, FL 34453 US

**New Principal Place of Business:**

**Current Mailing Address:**

8 N FLA AVENUE  
INVERNESS, FL 34453 US

**New Mailing Address:**

FEI Number: 59-1554576

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DAVIS, HERBERT  
911 NW 209 AVE 108  
PEMBROKE PINES, FL 33029 US

**Name and Address of New Registered Agent:**

MANNION, MARK  
8 N FLA AVENUE  
INVERNESS, FL 34453 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: MARK MANNION

01/07/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MANNION, MARK  
Address: 706 N. HEATHROW DR  
City-St-Zip: LECANTO, FL 34461

Title: ST ( ) Delete  
Name: DAVIS, JOHN W.  
Address: 240 N INDIANAPOLIS AVE  
City-St-Zip: HERNANDO, FL 34442

Title: VP ( ) Delete  
Name: DAVIS, SHERRY L  
Address: 6100 SW 136 AVE  
City-St-Zip: DAVIE, FL 33330

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: MARK MANNION

PRES

01/07/2009

Electronic Signature of Signing Officer or Director

Date