

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 480097

FILED  
Jan 03, 2012  
Secretary of State

**Entity Name:** CHRISTIE'S PLUMBING COMPANY

**Current Principal Place of Business:**

5508 MARINA DRIVE  
SUITE D  
HOLMES BEACH, FL 34217 US

**New Principal Place of Business:**

**Current Mailing Address:**

5508 MARINA DRIVE  
SUITE D  
HOLMES BEACH, FL 34217 US

**New Mailing Address:**

**FEI Number:** 59-1603622

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CHRISTIE, HEATHER P  
8826 17TH AVENUE CIRCLE, NW  
BRADENTON, FL 34209 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: PCD  
Name: CHRISTIE, PAUL J  
Address: 8826 17TH AVENUE CIRCLE, NW  
City-St-Zip: BRADENTON, FL 34209 US

Title: D  
Name: CHRISTIE, KATHERINE E  
Address: 6604 RIVERVIEW BLVD  
City-St-Zip: BRADENTON, FL 34209 US

Title: TD  
Name: CHRISTIE, HEATHER P  
Address: 8826 17TH AVENUE CIRCLE, NW  
City-St-Zip: BRADENTON, FL 34209 US

Title: S  
Name: PAYNTER, GEORGIA C  
Address: 6911 RIVERVIEW BLVD  
City-St-Zip: BRADENTON, FL 34209 US

Title: VP  
Name: CHRISTIE, E. DENNIS  
Address: 6604 RIVERVIEW BLVD  
City-St-Zip: BRADENTON, FL 34209 US

I hereby 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 all other like empowered.

SIGNATURE: KATHERINE E. CHRISTIE

D

01/03/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date