

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 598028

FILED
Nov 24, 2008
Secretary of State

Entity Name: JOHNNY JONES PLUMBING, INC.

Current Principal Place of Business:

456 DELEON AVE
ORLANDO, FL 32805

New Principal Place of Business:

Current Mailing Address:

456 DELEON AVE
ORLANDO, FL 32805 US

New Mailing Address:

FEI Number: 59-1864646 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, LISA B
3348 S. LAKE BUTLER BLVD
WINDERMERE, FL 34786 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: P () Delete
Name: JONES, LINDSEY S
Address: 3348 S. LAKE BUTLER BLVD
City-St-Zip: WINDERMERE, FL 34786

Title: VP () Delete
Name: JONES, LISA B
Address: 3348 S. LAKE BUTLER BLVD
City-St-Zip: WINDERMERE, FL 34786

Title: T () Delete
Name: JONES, CHRISTOPHER J
Address: 3348 S. LAKE BUTLER BLVD
City-St-Zip: WINDERMERE, FL 34786

Title: () Delete
Name:
Address:
City-St-Zip:

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:

Title: S () Change (X) Addition
Name: GRAY, CHRISTOPHER LLOYD
Address: 181 AVENUE A
City-St-Zip: GENEVA, FL 32732

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: LISA JONES

VP

11/24/2008

Electronic Signature of Signing Officer or Director

_____ Date