

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 15, 2007 08:00 A**  
**Secretary of State**

**DOCUMENT # 618335**

1. Entity Name  
**GARY RODGERS PLUMBING COMPANY, INC.**



Principal Place of Business  
**1910-1 BASSETT RD  
JACKSONVILLE, FL 32208**

Mailing Address  
**P.O. BOX 350450  
JACKSONVILLE, FL 32235**



01182007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-1890385**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**RODGERS, GARY D  
13026 BERWICKSHIRE DR  
JACKSONVILLE, FL 32224**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

**U00000636638  
02/26/07-80028-005 150.00**

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	RODGERS, GARY D
STREET ADDRESS	13026 BERWICKSHIRE DR
CITY-ST-ZIP	JACKSONVILLE, FL 32224
TITLE	ST
NAME	RODGERS, JANET C
STREET ADDRESS	13026 BERWICKSHIRE DR
CITY-ST-ZIP	JACKSONVILLE, FL 32224
TITLE	VP
NAME	RODGERS, ANDREWS J
STREET ADDRESS	49157 RIVER BLUFF RD
CITY-ST-ZIP	HILLIARD, FL 32046
TITLE	VP
NAME	RODGERS, CHRISTOPHER J
STREET ADDRESS	12339 SUTTON ISLAND DR
CITY-ST-ZIP	JACKSONVILLE, FL 32225
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Janet C. Rodgers Sec/21ew Janet C. Rodgers 2-13-07 904-765-7964  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #