


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 19, 2007 08:00 AM
Secretary of State

DOCUMENT # 719705 1. Entity Name PLUMBERS AND PIPE FITTERS LOCAL UNION NO. 719 HOLDING COMPANY, INC.	
--	---

Principal Place of Business NO 719 HOLDING COMPANY INC 2502 S ANDREWS AVE FORT LAUDERDALE, FL 33316	Mailing Address NO 719 HOLDING COMPANY INC 2502 S ANDREWS AVE FORT LAUDERDALE, FL 33316
--	--



04132007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-0442562	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CALDER, ROBERT M
2502 SOUTH ANDRES AVENUE (BUSINESS)
FORT LAUDERDALE, FL 33316

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 _____

**Filing Fee is \$81.25
Due by May 1, 2007**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WITZ, ROBERT L 2950 N W 106TH AVENUE, #3 SUNRISE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CALDER, ROBERT M 261 SW 58 AVE FORT LAUDERDALE, FL 33317
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD PETRIE, JOSEPH B 309 NW 30 COURT FORT LAUDERDALE, FL 33311
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

U00000718170
05/01/07-80011-008 61.25

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 617, 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: Robert M. Calder **ROBERT M. CALDER** 4-17-07 954-522-2532
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #