

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jun 29, 2005
Secretary of State**

DOCUMENT# 736933

Entity Name: SARASOTA COUNTY PLUMBING, HEATING & COOLING CONTRACTORS, INC.

Current Principal Place of Business:

3860 MALEC CIRCLE
SARASOTA, FL 34233

New Principal Place of Business:

Current Mailing Address:

3860 MALEC CIRCLE
SARASOTA, FL 34233

New Mailing Address:

FEI Number: 59-1691895 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

WOLF, JON G.
4541 LAKE VISTA DR
SARASOTA, FL 34233 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: D () Delete
Name: RIZI, BOB
Address: 5671 DEREK AVE
City-St-Zip: SARASOTA, FL 34233

Title: SD () Delete
Name: WOLF, JON
Address: 4541 LAKE VISTA DR
City-St-Zip: SARASOTA, FL 34233

Title: TD () Delete
Name: PEZZELLA, MARIO
Address: 3860 MALEC CIRCLE
City-St-Zip: SARASOTA, FL 34233

Title: PD () Delete
Name: LETTERMAN, ROBERT
Address: 164 GANTT RD
City-St-Zip: SARASOTA, FL 34233

Title: PD () Delete
Name: ROBERTS, TERRY
Address: 1606 EAST AVE
City-St-Zip: SARASOTA, FL 34237

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: () 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 for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARIO PEZZELLA

TD

06/29/2005

Electronic Signature of Signing Officer or Director

_____ Date