## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#736933** 

City-St-Zip:

FILED Mar 27, 2009 Secretary of State

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

**Current Principal Place of Business: New Principal Place of Business:** 3860 MALEC CIRCLE SARASOTA, FL 34233 **Current Mailing Address: New Mailing Address:** 3860 MALEC CIRCLE SARASOTA, FL 34233 FEI Number: 59-1691895 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WOLF, JON G SECT 4541 LAKE VISTA DR SARASOTA, FL 34233 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Delete () Change () Addition RIZI, BOB Name: Name: 5671 DEREK AVE Address: Address: City-St-Zip: SARASOTA, FL 34233 City-St-Zip: Title: SD ( ) Delete Title: () Change () Addition WOLF, JON Name: Name: Address: 4541 LAKE VISTA DR Address: City-St-Zip: SARASOTA, FL 34233 City-St-Zip: Title: () Delete Title: EX.D (X) Change ( ) Addition PEZZELLA, MARIO PEZZELLA, MARIO Name: Name: 3860 MALEC CIRCLE 3860 MALEC CIRCLE Address: Address: City-St-Zip: SARASOTA, FL 34233 City-St-Zip: SARASOTA, FL 34233 Title: ( ) Delete Title: PD (X) Change ( ) Addition Name: LETTERMAN, ROBERT Name: LOIKO, WILLIAM Address: 164 GANTT RD Address: 6020 DEACON RD City-St-Zip: SARASOTA, FL 34233 City-St-Zip: SARASOTA, FL 34238 Title: () Delete Title: (X) Change ( ) Addition ROBERTS, TERRY BOGACZ, PAUL Name: Name: 1606 EAST AVE 2249 INDUSTRIAL BLVD. Address: Address: City-St-Zip: SARASOTA, FL 34237 City-St-Zip: SARASOTA, FL 34234 Title: () Delete Title: ( ) Change (X) Addition SMITH, MARGIE S Name: Name: Address: Address: 1606 EAST AVE N

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SARASOTA, FL 34237

SIGNATURE: WILLIAM LOIKO PRES 03/27/2009