2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 03, 2007
Secretary of State

DOCUMENT# F03000000975

Entity Name: NORTHWEST PLUMBING JACKSONVILLE, INC.

Current Principal Place of Business:

6100 PHILLIPS HIGHWAY
JACKSONVILLE, FL 32216

New Principal Place of Business:

Current Mailing Address:

6310 MABLETON PARKWAY
STE 1000
MABLETON, GA 30126

New Mailing Address:

FEI Number: 36-4521655 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: MAHAFFEY, WILLIAM
Address: 6310 MABLETON PARKWAY, STE 1000
City-St-Zip: MABLETON, GA 30126

Title: VPTD ( ) Delete
Name: BRADY, RAY
Address: 6310 MABLETON PARKWAY, STE 1000
City-St-Zip: MABLETON, GA 30126

Title: VPD ( ) Delete
Name: MAHAFFEY, TONY
Address: 6310 MABLETON PARKWAY, STE 1000
City-St-Zip: MABLETON, GA 30126

Title: VPSD ( ) Delete
Name: WHITLOCK, EDMUND
Address: 6310 MABLETON PARKWAY, STE 1000
City-St-Zip: MABLETON, GA 30126

Title: D ( ) Delete
Name: BELL, LISA M
Address: 6310 MABLETON PARKWAY, STE 1000
City-St-Zip: MABLETON, GA 30126

Title: D ( ) Delete
Name: BLACKERBY, WAYNE
Address: 6310 MABLETON PARKWAY, STE 1000
City-St-Zip: MABLETON, GA 30126

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: BOOZER, RUSSELL
Address: 6310 MABLETON PARKWAY, STE 1000
City-St-Zip: MABLETON, GA 30126

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 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: RAY E BRADY VPTD 01/03/2007

Electronic Signature of Signing Officer or Director — Date