

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000006435

FILED  
Mar 25, 2010  
Secretary of State

**Entity Name:** NORTHWEST PLUMBING ORLANDO, INC.

**Current Principal Place of Business:**

7407 MONETARY DRIVE  
ORLANDO, FL 32809

**New Principal Place of Business:**

**Current Mailing Address:**

6310 MABLETON PKWY  
STE 1000  
MABLETON, GA 30126

**New Mailing Address:**

6310 MABLETON PKWY  
SUITE 1000  
MABLETON, GA 30126

**FEI Number:** 20-1774045

**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  
Name: MAHAFFEY, JAMES  
Address: 6310 MABLETON PKWY, STE 1000  
City-St-Zip: MABLETON, GA 30126

Title: VD  
Name: MAHAFFEY, TONY  
Address: 6310 MABLETON PKWY, STE 1000  
City-St-Zip: MABLETON, GA 30126

Title: VD  
Name: BLACKERBY, DAVID WAYNE  
Address: 6310 MABLETON PKWY, STE 1000  
City-St-Zip: MABLETON, GA 30126

Title: VD  
Name: MCCLELLAN, DAVID  
Address: 6310 MABLETON PKWY, STE 1000  
City-St-Zip: MABLETON, GA 30126

I hereby 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 all other like empowered.

**SIGNATURE:** DAVID MCCLELLAN

VP

03/25/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date