


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 07, 2008 08:00 A**  
**Secretary of State**

DOCUMENT # F39606 1. Entity Name REEDY PLUMBING, INC.	
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Principal Place of Business 5186 SR 674 WIMAUMA, FL 33598 US	Mailing Address 5186 SR 674 WIMAUMA, FL 33598 US
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**DO NOT WRITE IN THIS SPACE**

03282008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2110014	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

PASKERT, CHRISTOPHER & SHEREE  
 502 18TH AVE SE  
 RUSKIN, FL 33570

**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)

U0000000004002  
04/17/08-60029-017 158.75

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

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 PASKERT, CHRISTOPHER 502 18TH AVE SE RUSKIN, FL 33570
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD PASKERT, SHEREE D. 502 18TH AVE SE RUSKIN, FL
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

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 607, 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: Sherree D. Paskert Date: 3/28/08 Daytime Phone #: 813 634-1163

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR