2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 23, 2008 08:00 AN Secretary of State

| | ANNUAL | KEPOKI | 1 | Secretary of S | |
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| 1. Entity Nam | MENT # F49610 DUKES PLUMBING, INC. | | | | |
| Principal Place of Business Mailing Address 2043 NE 43RD ST P.O. BOX 263 OCALA, FL 34479 US OCALA, FL 34478 US | | | | | |
| E | O NOT WRITE | | j | 04212008 No Chg-P CR2E034 (11/05) 4. FEI Number Applied For 59-2134785 5. Certificate of Status Desired S8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent DUKES, WAYNE 2043 NE 43 ST OCALA, FL 34479 | | | | 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 Signature, typed or printed name of registered agent and little If applicable. (NOTE: Registered Agent signature required when reinstating) PILE NOWILL FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP | DST DUKES, CHEARIE 2043 NE 43RD STREET OCALA, FL DP DUKES, WAYNE 2043 NE 43RD STREET OCALA, FL | IRECTORS | | 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, withful other like empowered. | | | | | |