

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G57173

Entity Name: CHARLOTTE PLUMBING, INC.

FILED
Sep 06, 2005
Secretary of State

Current Principal Place of Business:

C/O JACK O. HACKETT, II
P.O. DRAWER 511447
PUNTA GORDA, FL 339511447

Current Mailing Address:

P.O. DRAWER 511447
PUNTA GORDA, FL 339511447 US

New Principal Place of Business:

C/O JACK O. HACKETT, II
99 NESBIT STREET
PUNTA GORDA, FL 33950

New Mailing Address:

99 NESBIT STREET
PUNTA GORDA, FL 33950 US

FEI Number: 59-2327525

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HACKETT, JACK O., II
99 NESBIT STREET
PUNTA GORDA, FL 33950 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: THORNBERRY, THOMAS P, .
Address: 1266 MARKET CIR.
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: VP () Delete
Name: THORNBERRY, LINDA C
Address: 1266 MARKET CIR.
City-St-Zip: PORT CHARLOTTE, FL 33953

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 Section 119.07(3)(i), 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: THOMAS P. THORNBERRY

PSTD

09/06/2005

Electronic Signature of Signing Officer or Director

Date