

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G89498

FILED
Apr 30, 2009
Secretary of State

Entity Name: THE ALERT PLUMBING SERVICE OF ARCADIA, INC.

Current Principal Place of Business:

2587 NW PINE CREEK AVE
ARCADIA, FL 34266 US

New Principal Place of Business:

Current Mailing Address:

2587 NW PINE CREEK AVE
ARCADIA, FL 34266 US

New Mailing Address:

FEI Number: 59-2428444 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

LEWIS, KARL J
2587 NW PINE CREEK AVE
ARCADIA, FL 34266 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: P () Delete
Name: LEWIS, KARL J
Address: 2587 NW PINE CREEK AVENUE
City-St-Zip: ARCADIA, FL 34266

Title: V () Delete
Name: LEWIS, JERRY
Address: 2587 NW PINE CREEK AVE
City-St-Zip: ARCADIA, FL 34266

Title: S () Delete
Name: MARCOVITCH, MARK
Address: 1550 CATTLEMAN RD
City-St-Zip: SARASOTA, FL 34232

Title: T () Delete
Name: POLSTON, JENNA W
Address: 2589 NW PINE CREEK AVE
City-St-Zip: ARCADIA, FL 34266

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: T (X) Change () Addition
Name: LEWIS, JENNA W
Address: 2589 NW PINE CREEK AVE
City-St-Zip: ARCADIA, FL 34266

I hereby certify that the information supplied with this filing does not qualify 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: KARL LEWIS

Electronic Signature of Signing Officer or Director

P

04/30/2009

Date