

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H28673

**FILED**  
**Mar 02, 2011**  
**Secretary of State**

**Entity Name:** LEE COUNTY PLUMBING AND SUPPLY CORP.

**Current Principal Place of Business:**

532 SOUTHEAST 47TH TERR  
#7  
CAPE CORAL, FL 33904

**New Principal Place of Business:**

**Current Mailing Address:**

532 SOUTHEAST 47TH TERR  
#7  
CAPE CORAL, FL 33904

**New Mailing Address:**

**FEI Number:** 59-2476739

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LOPEZ, DANIA MRS  
3329 SE 1ST AVE  
CAPE CORAL, FL 33904 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: LOPEZ, DANIA  
Address: 3329 SE 1ST AVE  
City-St-Zip: CAPE CORAL, FL 33904 US

Title: S  
Name: DIONNE, LOPEZ MRS  
Address: 3615 SW SANTA BARBARA PL  
City-St-Zip: CAPE CORAL, FL 33914 US

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: DANIA LOPEZ

PRES

03/02/2011

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

\_\_\_\_\_  
Date