

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H35896

FILED
Jun 22, 2009
Secretary of State

Entity Name: HEALEY PLUMBING, INC.

Current Principal Place of Business:

HEALEY PLUMBING INC.
1238 S W 6 STREET
POMPANO BEACH, FL 33069 US

New Principal Place of Business:

Current Mailing Address:

1238 S W 6 STREET
POMPANO BEACH, FL 33069 US

New Mailing Address:

HEALEY PLUMBING INC.
1238 S W 6 STREET
POMPANO BEACH, FL 33069 US

FEI Number: 59-2474326

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HEALEY, PETER
4341 N.E. 22ND AVENUE
FT. LAUDERDALE, FL 33308 US

Name and Address of New Registered Agent:

HEALEY, PETER
16 OCEAN DUNE CIRCLE
PALM COAST, FL 32137 US

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:

06/22/2009

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: P () Delete
Name: HEALEY, PETER
Address: 4341 N.E. 22ND AVENUE
City-St-Zip: FT. LAUDERDALE, FL

Title: S () Delete
Name: HEALEY, DEBBIE
Address: 4341 N.E. 22ND AVENUE
City-St-Zip: FT. LAUDERDALE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HEALEY, PETER
Address: 16 OCEAN DUNE CIRCLE
City-St-Zip: PALM COAST, FL 32137

Title: S (X) Change () Addition
Name: HEALEY, DEBBIE
Address: 16 OCEAN DUNE CIRCLE
City-St-Zip: PALM COAST, FL 32137

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: PETER HEALEY

PRES

06/22/2009

Electronic Signature of Signing Officer or Director

Date