

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H97185

FILED
Apr 27, 2007
Secretary of State

Entity Name: PORT ORANGE PLUMBING, INC.

Current Principal Place of Business:

4655 SPRUCE CREEK BOULEVARD
SUITE H
PORT ORANGE, FL 32127 US

New Principal Place of Business:

1947 FOREST AVE
PORT ORANGE, FL 32119 US

Current Mailing Address:

1376 DEXTER DR.
PORT ORANGE, FL 32129

New Mailing Address:

1376 DEXTER DR. EAST
PORT ORANGE, FL 32129

FEI Number: 59-2637402

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HINELINE, LAVERNE
1376 DEXTER DRIVE
PORT ORANGE, FL 32129 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: PD () Delete
Name: HINELINE, HARLAN T., JR.
Address: 1376 DEXTER DR
City-St-Zip: PORT ORANGE, FL

Title: STD () Delete
Name: HINELINE, LAVERNE,
Address: 1376 DEXTER DR
City-St-Zip: PORT ORANGE, FL

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 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: LAVERNE HINELINE

TRES

04/27/2007

Electronic Signature of Signing Officer or Director

Date