

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J00095

Entity Name: B.A. COX PLUMBING, INC.

FILED
Apr 04, 2006
Secretary of State

Current Principal Place of Business:

2100 NORTH SAGINAW ROAD
AVON PARK, FL 33825 US

New Principal Place of Business:

5005 MYRTLE BEACH DR
SEBRING, FL 33872 US

Current Mailing Address:

P. O. BOX 186
AVON PARK, FL 338260186 US

New Mailing Address:

FEI Number: 59-2675527

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COX, BERTRAND ALVIS, III
2100 NORTH SAGINAW ROAD
AVON PARK, FL 33825 US

Name and Address of New Registered Agent:

COX, BERTRAND ALVIS, III
5005 MYRTLE BEACH DR
SEBRING, FL 33872 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:

04/04/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: COX, BERTRAND ALVIS, III
Address: 2100 NORTH SAGINAW ROAD
City-St-Zip: AVON PARK, FL 33825 US

Title: DST () Delete
Name: COX, VIRGINIA LOUISE,
Address: 2100 NORTH SAGINAW ROAD
City-St-Zip: AVON PARK, FL 33825 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: COX, BERTRAND ALVIS, III
Address: 5005 MYRTLE BEACH DR
City-St-Zip: SEBRING, FL 33872 US

Title: DST (X) Change () Addition
Name: COX, VIRGINIA LOUISE,
Address: 5005 MYRTLE BEACH DR
City-St-Zip: SEBRING, FL 33872 US

I hereby certify that the information supplied with this filing does not qualify for the 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: VIRGINIA L COX

DST

04/04/2006

Electronic Signature of Signing Officer or Director

Date