


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 19, 2005 8:00 am
Secretary of State

04-21-2005 90258 023 ***150.00

DOCUMENT # J57316 1. Entity Name FRANK WOOD PLUMBING INC.	
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Principal Place of Business 1815 TURNER WOOD LANE PANAMA CITY BEACH, FL 32407 US	Mailing Address 1815 TURNER WOOD LANE PANAMA CITY BEACH, FL 32407 US
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66017930



04192005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2763894	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent WOOD, FRANKLIN D. 1815 TURNER WOOD LANE PANAMA CITY BEACH, FL 32407
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**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Frank Wood* DATE 5-17-05
Signature, typed or printed name of registered agent and filer if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD WOOD, FRANKLIN D. 1815 TURNER WOOD LN PANAMA CITY BCH, FL 32407
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD WOOD, VALORIE 1815 TURNER WOOD LANE PANAMA CITY BCH, FL 32407
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment, with an address, with all other like empowered.

SIGNATURE *Frank Wood* DATE 5-17-05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #