2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

LAMY Drant - President

FILED Mar 26, 2005 08:00 AM Secretary of State

352.726.0814

Daytime Prigne #

3.24.2005

					4 af C4-4.
DOCUMENT # J68326 1. Entity Name GRANT PLUMBING COMPANY, INC.				Sec	retary of State
Principal Place of Business % LARRY GRANT 4424 E. ARLINGTON ST. INVERNESS, FL 34453 US	Mailing Address % LARRY GRANT 4424 E. ARLINGTON ST. INVERNESS, FL 34453 US				## #### #### #########################
DO NOT WRITE IN THIS SPACE		CE	01152005 No Chg-P CR2E034 (10/03) 4. FEI Number Applied For S9-2808755 Not Applied For Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required		
GRANT, LARRY 4424 E. ARLINGTON ST. INVERNESS, FL 34453	istered Agent			OT WF	
The above named entity submits this statement for the the obligations of registered agent. SIGNATURE Signature, typod or printed name of registered agent and it. Signature. Typod or printed name of registered agent and it. Signature. Typod or printed name of registered agent and it. Signature. Typod or printed name of registered agent and it. Signature. Typod or printed name of registered agent and it. Signature. Typod or printed name of registered agent and it. Signature. Typod or printed name of registered agent and it. Signature. Typod or printed name of registered agent and it. Signature. Typod or printed name of registered agent and it. Signature. Typod or printed name of registered agent and it. Signature. Typod or printed name of registered agent and it. Signature. Typod or printed name of registered agent and it. Signature. Typod or printed name of registered agent and it. Signature. Typod or printed name of registered agent and it. Signature. Typod or printed name of registered agent and it. Signature. Typod or printed name of registered agent and it. Signature. Typod or printed name of registered agent and it. Signature. Typod or printed name of registered agent and it.		ed office or register		the State of Florid	a fam familiar with, and accept
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.			00 May Be ed to Fees		
10. OFFICERS AND DIR TITLE PD GRANT, LARRY STREET ADDRESS CITY ST JIP INVERNESS, FL TITLE NAME STREET ADDRESS CITY-ST-JIP TITLE NAME NAME	ECTORS			0000002 3/26/05-81	
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP				IOT WE	
FITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this indicated on this report or supplemental report is fru of the corporation or the receiver or trustee empowe changed, or on an attachment with an address, with	e and accurate and that my signared to execute this report as requi	mption stated in Se ture shall have the red by Chapter 607	ction 119.07(3)(i), Fi same legal effect as , Florida Statutes, al	iorida Statutes. I fu if made under catt nd that my name a	orther certify that the information h; that I am an officer or director ppears in Block 10 or Block 11 if