

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 28, 2007 8:00 am
Secretary of State

02-28-2007 90149 033 ****50.00

DOCUMENT # L01000001408

1. Entity Name
PROGRESSIVE PLUMBING S.C., LLC



Principal Place of Business
**1064 WEST HIGHWAY 50
CLERMONT, FL 34711**

Mailing Address
**P.O. BOX 121126
CLERMONT, FL 34712**

DO NOT WRITE IN THIS SPACE



01082007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
59-3694787

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**LAWSON, WILLIAM E
1064 WEST HIGHWAY 50
CLERMONT, FL 34711**

**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

William E. Lawson

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1/9/07

DATE

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**P
LAWSON, WILLIAM E
1064 HWY 50
CLERMONT, FL 34711**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

William E. Lawson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1/9/07

Date

(352) 394-7171

Daytime Phone #