2005 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

SIGNATURE:

SIGNATURE AND TYPED OF

Apr 27, 2005 08:00 AM Secretary of State **DOCUMENT # L03000045597** 1 PLUMBING CO., L.L.C. Mailing Address Principal Place of Business 350 AVERY STREET 300 AVERY STREET SAINT AUGUSTINE, FL 32084 SAINT AUGUSTINE, FL 32084 CR2E083 (10/03) 04192005 No Chg-LLC DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 51-0497669 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE FARRELL, RICHARD J 6847 MIDDLETON AVENUE ST. AUGUSTINE, FL 32080 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 RICHARD J FARELL Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE FARRELL, RICHARD J NAME STREET ADDRESS **6847 MIDDLETON AVENUE** CITY - ST - ZIP ST. AUGUSTINE, FL 32080 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP UTLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 employeed to execute this report as required by Chapter 608, Florida Statutes.

D MAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

FILED