

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L36995

FILED  
Mar 15, 2008  
Secretary of State

Entity Name: A-1 PLUMBING SUPPLY & SPECIALTIES, INC.

## Current Principal Place of Business:

% STEVEN COOLEY  
5152 UNIVERISTY BLVD. WEST  
JACKSONVILLE, FL 32216

## New Principal Place of Business:

% STEVEN COOLEY  
5152 UNIVERSITY BLVD. WEST  
JACKSONVILLE, FL 32216

## Current Mailing Address:

% STEVEN COOLEY  
5152 UNIVERISTY BLVD. WEST  
JACKSONVILLE, FL 32216

## New Mailing Address:

% STEVEN COOLEY  
5152 UNIVERSITY BLVD. WEST  
JACKSONVILLE, FL 32216

FEI Number: 59-2961189

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HUSEMAN & MARQUINEZ, P.A.  
3733 UNIVERSITY BLVD W  
SUITE 210-B  
JACKSONVILLE, FL 32217 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: OD ( ) Delete  
Name: COOLEY, STEVEN W.,  
Address: 5635 NETTIE RD  
City-St-Zip: JACKSONVILLE, FL

Title: STD ( ) Delete  
Name: COOLEY, DOUGLAS  
Address: 1620 PITCH PINE AVE  
City-St-Zip: JACKSONVILLE, FL 32259

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: STEVEN W. COOLEY

OD

03/15/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date