

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L39017

FILED  
Apr 29, 2008  
Secretary of State

Entity Name: ACRES & SON PLUMBING, INC.

## Current Principal Place of Business:

5701 HOUGHIN STREET  
SUITE 1  
NAPLES, FL 34109 US

## New Principal Place of Business:

## Current Mailing Address:

5701 HOUGHIN STREET  
SUITE 1  
NAPLES, FL 34109 US

## New Mailing Address:

FEI Number: 65-0211417      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PAULICH, JOHN, III  
5147 CASTELLO DRIVE  
NAPLES, FL 34103 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: PD ( ) Delete  
Name: ACRES, RANDY M.,  
Address: 425 15TH AVE S  
City-St-Zip: NAPLES, FL 34102

Title: VT ( ) Delete  
Name: ACRES, SANDRA E.,  
Address: 425 15TH AVE S  
City-St-Zip: NAPLES, FL 34102

Title: VS ( ) Delete  
Name: FARNSWORTH, NANCY,  
Address: 9158 ESTERO RIVER CIRCLE  
City-St-Zip: ESTERO, FL 33928

Title: VP ( ) Delete  
Name: HATCH, RENE ACRES  
Address: 3431 3RD AVENUE NW  
City-St-Zip: NAPLES, FL 34120

Title: VP ( ) Delete  
Name: ACRES, ROCHELLE C  
Address: 3350 CROWN POINTE BLVD. W #202  
City-St-Zip: NAPLES, FL 34112

Title: VP ( ) Delete  
Name: BOWLING, RONALD L  
Address: 6196 WOODSTONE DR.  
City-St-Zip: NAPLES, FL 34112

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: NANCY FARNSWORTH

VS

04/29/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date