

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M69526

FILED  
Mar 22, 2007  
Secretary of State

Entity Name: CERTIFIED PLUMBING OF BREVARD, INC.

**Current Principal Place of Business:**

CERTIFIED PLUMBING OF BREVARD, INC.  
1401 PENNY KAMP ST., NE  
PALM BAY, FL 32907 US

**New Principal Place of Business:**

**Current Mailing Address:**

CERTIFIED PLUMBING OF BREVARD, INC.  
1401 PENNY KAMP ST., NE  
PALM BAY, FL 32907 US

**New Mailing Address:**

FEI Number: 59-2879915      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

WHITEHEAD, ALLAN  
930 S HARBOR CITY BLVD  
SUITE 505  
MELBOURNE, FL 32901 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: DP ( ) Delete  
Name: JIMENEZ, DANIEL,  
Address: 4345 DEERWOOD TRAIL  
City-St-Zip: MELBOURNE, FL 32934 US

Title: V ( ) Delete  
Name: TRENNER, CHRISTOPHER E  
Address: 1100 TOPLIFF CIR. NE  
City-St-Zip: PALM BAY, FL 32907

Title: T ( ) Delete  
Name: KOLLANDA, SPIRO D  
Address: 1243 JADE LANE  
City-St-Zip: PALM BAY, FL 32907

Title: S ( ) Delete  
Name: WILSON, HARRIET L  
Address: 182 COPENHAVER AVE. NE  
City-St-Zip: PALM BAY, FL 32907

**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:

I hereby certify that the information supplied with this filing does not qualify for the 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: DAN JIMENEZ

PRES

03/22/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date