

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000111509

Entity Name: TRANQUILITY PLUMBING, INC.

FILED
Feb 21, 2006
Secretary of State

Current Principal Place of Business:

6141 MID METRO DR
SUITE 6
FT MYERS, FL 33912

New Principal Place of Business:

4306 KERNEL CIRCLE
FORT MYERS, FL 33916

Current Mailing Address:

6141 MID METRO DR
SUITE 6
FT MYERS, FL 33912

New Mailing Address:

4306 KERNEL CIRCLE
FORT MYERS, FL 33916

FEI Number: 65-1060192

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NICHOLSON, PATRICIA B
6141 MID METRO DR
SUITE 6
FT MYERS, FL 33912 US

Name and Address of New Registered Agent:

NICHOLSON, PATRICIA B
4306 KERNEL CIRCLE
FORT MYERS, FL 33916 US

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: PATRICIA B. NICHOLSON

02/21/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: NICHOLSON, PATRICIA B
Address: 6141 MID METRO DR
City-St-Zip: FT MYERS, FL 33912

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: NICHOLSON, PATRICIA B
Address: 4306 KERNEL CIRCLE
City-St-Zip: FORT MYERS, FL 33916

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: PATRICIA B. NICHOLSON

P

02/21/2006

Electronic Signature of Signing Officer or Director

Date