

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000080152

Entity Name: PLUMBING DOCTOR II, INC.

FILED  
Jan 18, 2009  
Secretary of State

## Current Principal Place of Business:

4165 WHIDDEN BOULEVARD  
UNIT #1  
CHARLOTTE HARBOR, FL 33980

## New Principal Place of Business:

## Current Mailing Address:

4165 WHIDDEN BOULEVARD  
UNIT #1  
CHARLOTTE HARBOR, FL 33980

## New Mailing Address:

FEI Number: 65-1141083

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCHUMACHER, DAVID  
3052 VILLA  
PORT CHARLOTTE, FL 33980 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: D ( ) Delete  
Name: SCHUMACHER, DAVID  
Address: 3050 VILLA ST.  
City-St-Zip: CHARLOTTE HARBOR, FL 33980

Title: D ( ) Delete  
Name: SCHUMACHER, LINDA  
Address: 3052 VILLA ST.  
City-St-Zip: CHARLOTTE HARBOR, FL 33980

## 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: DAVID SCHUMACHER

PRES

01/18/2009

Electronic Signature of Signing Officer or Director

Date