2008 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Apr 09, 2008 08:00 Al Secretary of State **DOCUMENT # P02000031229** ASHMEAD PLUMBING, INC. Principal Place of Business Mailing Address P.O. BOX 5305 5064 HAYES ROAD LAKELAND, FL 33807 LAKELAND, FL 33811 01242008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 03-0420241 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE ASHMEAD, MICHAEL P 5064 HAYES RD LAKELAND, FL 33811 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. the obligations of re-SIGNATURE DATE registered agent and title if applicable (NOTE: Registered Agent signature required when reinstaing) **\$5.00** May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees U00000887<u>018</u> 10. OFFICERS AND DIRECTORS 04/21/03-80003-817 150.00 TITLE ASHMEAD, MICHAEL P. 5064 HAYES ROAD STREET ADDRESS CITY-ST-ZIP LAKELAND, FL 33811 TIFLE NAME STREET ADDRESS CITY - ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE THEF NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CHY-S1-ZIP NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under cath; 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 in Block 10 or Block 11 if changed, or on an attachment with arrangeress, with all other like empowered.

Date

Daytme Phone #

FILED