2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000028933

1. Entity Name SNYDER PLUMBING OF THE TREASURE COAST, INC.



FILED Mar 17, 2005 08:00 AM Secretary of State

Principal Place of Business 755 8TH COURT - SUITE 6 GLENDALE INDUSTRIAL PARK VERO BEACH, FL 32960 Mailing Address

755 8TH COURT - SUITE 6 GLENDALE INDUSTRIAL PARK VERO BEACH, FL 32960



DO NOT WRITE IN THIS SPACE

03022005 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For 14-1875316 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SNYDER, RANDALL R 755 8TH COURT SUITE 6 VERO BEACH, FL 32960 DO NOT WRITE IN THIS SPACE

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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 Fiorida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent a				required when reinstating)	DATE
FiL After M	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	Election Campaign Finance Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS UNDER THE CONTROL OF THE					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SNYDER, RANDALL R 710 CARNATION DRIVE SEBASTIAN, FL 32958		-		T3/17/05-80052-006 150.00
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TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
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TITLE NAME STREET ADDRESS CITY-ST-ZIP				Aberband	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/1D/05 C

Daytime Phone #