

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000121657

FILED
Jan 24, 2005
Secretary of State

Entity Name: LONGS CERTIFIED PLUMBING SERVICES, INC.

Current Principal Place of Business:

5415 LAKE HOWELL RD UNIT 103
WINTER PARK, FL 32792

New Principal Place of Business:

Current Mailing Address:

5415 LAKE HOWELL RD UNIT 103
WINTER PARK, FL 32792

New Mailing Address:

FEI Number: 33-1075551

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LONG, MARK B
500 DENEDICT CT
CASSELBERRY, FL 32707 US

Name and Address of New Registered Agent:

LONG, MARK B
500 BENEDICT CT
CASSELBERRY, FL 32707 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: MARK B. LONG

01/24/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LONG, MARK B
Address: 500 BENEDICT CT
City-St-Zip: CASSELBERRY, FL 32707

Title: VD () Delete
Name: LONG, MARK B JR
Address: 500 BENEDICT CT
City-St-Zip: CASSELBERRY, FL 32707

Title: SD () Delete
Name: LONG, DENISE
Address: 500 BENEDICT CT
City-St-Zip: CASSELBERRY, FL 32707

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: LONG, MARK B JR
Address: 500 BENEDICT CT
City-St-Zip: CASSELBERRY, FL 32707

Title: S (X) Change () Addition
Name: LONG, DENISE
Address: 500 BENEDICT CT
City-St-Zip: CASSELBERRY, FL 32707

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DENISE LONG

S

01/24/2005

Electronic Signature of Signing Officer or Director

Date