

**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Sep 08, 2004 8:00 am**  
**Secretary of State**

09-08-2004 90122 037 \*\*\*550.00

**DOCUMENT # P03000145508**

1. Entity Name  
**PAUL RUSHING PLUMBING AND ELECTRICAL, INC.**



Principal Place of Business      Mailing Address  
**320 RUSHING COURT**      **320 RUSHING COURT**  
**DEFUNIAK SPRINGS, FL 32433**      **DEFUNIAK SPRINGS, FL 32433**

**24083606**



2. Principal Place of Business      3. Mailing Address  
**320 Rushing Ct.**      **320 Rushing Ct.**  
 Suite, Apt. #, etc.      Suite, Apt. #, etc.

09022004      Chg-P      CR2E034 (10/03)

City & State      City & State  
**Defuniak Springs, FL**      **Defuniak Springs, FL**  
 Zip      Country      Zip      Country  
**32433**      **Walton**      **32433**      **Walton**

4. FEI Number      Applied For  
**593244328**      Not Applicable

5. Certificate of Status Desired            \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
**POWELL RUSHING, SUSAN**  
**107 NORTH PARTIN DRIVE**  
**NICEVILLE, FL 32578**

7. Name and Address of New Registered Agent  
 Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City      **FL**      Zip Code

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.  
 SIGNATURE **Susan Powell, Rushing**      DATE **9/1/04**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reissuing)

**FILE NOW!!! FEE IS \$550.00**  
**Due by September 8, 2004**

9. Election Campaign Financing Trust Fund Contribution.            \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>RUSHING, PAUL W</b> <b>320 RUSHING COURT</b> <b>DEFUNIAK SPRINGS, FL 32433</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V</b> <b>RUSHING, KIRBY W</b> <b>POST OFFICE BOX 1358</b> <b>DEFUNIAK SPRINGS, FL 32435</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <b>RUSHING, MARY T</b> <b>320 RUSHING COURT</b> <b>DEFUNIAK SPRINGS, FL 32433</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T</b> <b>RUSHING, B. SUE</b> <b>POST OFFICE BOX 1358</b> <b>DEFUNIAK SPRINGS, FL 32435</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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: **Paul W. Rushing**      DATE **9/1/04**      DAYTIME PHONE # **850-892-7046**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR