


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**

**Apr 12, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P03000148112</b> 1. Entity Name <b>FORREST HARRIS PLUMBING SEWER &amp; DRAIN CLEANING INC.</b>																													
Principal Place of Business <b>11961 CR 680 WEBSTER FL 33597</b>		Mailing Address <b>11961 CR 680 WEBSTER FL 33597</b>																											
2. Principal Place of Business Suite, Apt #, etc.		3. Mailing Address Suite, Apt #, etc.																											
City & State		City & State																											
Zip	Country	Zip	Country	4. FEI Number <b>20-0691037</b> <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable																									
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				1st MOORE CR2E034 (10/04)																									
6. Name and Address of Current Registered Agent  <b>HARRIS, FORREST C 11961 CR 680 WEBSTER FL 33597</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____																													
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee Will Be \$550.00</b> <b>Make Check Payable to Florida Department of State</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>																										
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:70%;">P</td> <td style="width:20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>HARRIS, FORREST C</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>11961 CR 680</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>WEBSTER FL 33597</td> <td></td> </tr> </table>			TITLE	P	<input type="checkbox"/> Delete	NAME	HARRIS, FORREST C		STREET ADDRESS	11961 CR 680		CITY-ST-ZIP	WEBSTER FL 33597		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:70%;"></td> <td style="width:20%; text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>			TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP		
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**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/7/05 (352) 569-069**  
Date Daytime Phone #