2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000001440

Entity Name: WILLIAMS PLUMBING SERVICES, INC.

PORT ST. JOE, FL 32456 US

City-St-Zip:

FILED Aug 12, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place of E	New Principal Place of Business:	
2790 WES PORT ST.	T HWY 98 JOE, FL 32456	US	127 WESTCOTT CIRCLE PORT ST. JOE, FL 32456	S US	
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
PO BOX 1' PORT ST.	138 JOE, FL 32457	US	PO BOX 616 PORT ST. JOE, FL 32457	US	
FEI Number:		FEI Number Applied For (X)	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Register				ew Registered Agent:	
PORT ST.	COTT CIRCLE JOE, FL 32456 named entity su		purpose of changing its registered off	ice or registered agent, or both,	
SIGNATUR					
Election Can	ce with s. 607.193(Signature of Registered Ag 2)(b), F.S., the corporation did n Trust Fund Contribution (). ORS:	ot receive the prior notice.	Date O OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () E WILLIAMS, JAY F 127 WESTCOTT PORT ST. JOE, F	CIRCLE	Title: () 0 Name: Address: City-St-Zip:	Change () Addition	
Title: Name:	VP () C WILLIAMS, JAY F		Title: () (Name: Address:	Change () Addition	

City-St-Zip:

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: JAY F. WILLIAMS, JR. P 08/12/2005