## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000001440

115 HUNTER CIRCLE

PORT ST. JOE, FL 32456 US

Address:

City-St-Zip:

Entity Name: WILLIAMS PLUMBING SERVICES, INC.

FILED Sep 08, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 127 WESTCOTT CIRCLE PORT ST. JOE, FL 32456 US **Current Mailing Address: New Mailing Address:** PO BOX 616 PORT ST. JOE, FL 32457 US FEI Number: 56-2435552 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WILLIAMS, JAY F JR. 127 WESTCOTT CIRCLE PORT ST. JOE, FL 32456 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition WILLIAMS, JAY F JR. Name: Name: 127 WESTCOTT CIRCLE Address: Address: City-St-Zip: PORT ST. JOE, FL 32456 US City-St-Zip: Title: VΡ Title: () Change () Addition () Delete Name: WILLIAMS, JAY F SR. Name:

Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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. OWNE 09/08/2008