## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000006617

FILED Jan 05, 2009 Secretary of State

Entity Name: CAMPBELL AND WEEKS PLUMBING CONTRACTORS, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

3010 W BEAVER STREET JACKSONVILLE, FL 32254

**Current Mailing Address: New Mailing Address:** 

3010 W BEAVER STREET JACKSONVILLE, FL 32254

FEI Number: 20-0577911 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:

WICKES, LESLIE A ESQ. FISHER, TOUSEY, LEAS & BALL, P.A. 501 RIVERSIDE AVE., 7TH FLOOR 818 NORTH A1A JACKSONVILLE, FL 32202 SUITE 104

PONTE VEDRA BEACH, FL 32082 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: CLAY B. TOUSEY, JR. 01/05/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Name:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition WEEKS, MICHAEL W CAMPBELL, KEITH M Name: Name:

3070 ANDERSON ROAD 3010 WEST BEAVER STREET Address: Address: City-St-Zip: GREEN COVE SPRINGS, FL 32043 US City-St-Zip: JACKSONVILLE, FL 32254 US

DV Title: VΡ Title: () Delete (X) Change ( ) Addition CAMPBELL, KEITH M Name: Name: CAMPBELL, HEIDI J

2732 VICTORIAN OAKS DRIVE 3010 WEST BEAVER STREET Address: Address: JACKSONVILLE, FL 32223 US JACKSONVILLE, FL 32254 US City-St-Zip: City-St-Zip:

( ) Delete Title: Title: (X) Change ( ) Addition

WEEKS, CHRISTINE L COSTANZO, BARBARA Name: Name: 3070 ANDERSON RD. 3010 WEST BEAVER STREET Address: Address: GREEN COVE SPRINGS, FL 32043 US City-St-Zip: JACKSONVILLE, FL 32254 US City-St-Zip:

Title: (X) Delete Title: () Change () Addition

CAMPBELL, HEIDI J Name: 2732 VICTORIAN OAKS DRIVE Address: Address: City-St-Zip: JACKSONVILLE, FL 32223 US 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: KEITH M CAMPBELL DP 01/05/2009