

# **2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P04000026122

Entity Name: TOWN PLUMBING, INC.

**FILED**  
**Jun 26, 2009**  
**Secretary of State**

**Current Principal Place of Business:**

253 SW 21ST TERR  
FORT LAUDERDALE, FL 33312

**New Principal Place of Business:**

**Current Mailing Address:**

253 SW 21ST TERR  
FORT LAUDERDALE, FL 33312

**New Mailing Address:**

PO BOX 23296  
FORT LAUDERDALE, FL 33307

FEI Number: 20-0842204

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ALKON, WESLEY  
3321 NE 19TH AVE  
OAKLAND PARK, FL 33304 US

**Name and Address of New Registered Agent:**

ALKON, WESLEY  
3321 NE 19 AV  
OAKLAND PARK, FL 33304 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

06/26/2009

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: ALKON, WES  
Address: 3433 NE 13TH AVE  
City-St-Zip: OAKLAND PARK, FL 33334

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: ALKON, WESLEY  
Address: 3433 NE 13 AV  
City-St-Zip: OAKLAND PARK, FL 33334

Title: VP ( ) Change (X) Addition  
Name: LA BRUYERE, STEPHEN A  
Address: 9615 TRIVOLO PL  
City-St-Zip: BOCA RATON, FL 33434

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: WESLEY ALKON

Electronic Signature of Signing Officer or Director

P

06/26/2009

Date