


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 14, 2008 08:00 A
Secretary of State

DOCUMENT # P04000028466 1. Entity Name FORD'S PLUMBING OF NAPLES, INC.	
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Principal Place of Business 15020 SAVANNAH DR NAPLES, FL 34119	Mailing Address 15020 SAVANNAH DR NAPLES, FL 34119
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DO NOT WRITE IN THIS SPACE



04102008 No Chg-P CR2E034 (11/05)

4. FEI Number 30-0226138	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent FORD, DONNA 15020 SAVANNAH DR NAPLES, FL 34119
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**DO NOT WRITE
IN THIS SPACE**

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 renewing) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000894089 04/24/08-80014-005 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FORD, DONNA 15020 SAVANNAH DR. NAPLES, FL 34119
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V FORD, EDWARD A 15020 SAVANNAH DR. NAPLES, FL 34119
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**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Donna Ford Donna Ford 4-10-08 239-438-6275
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #