

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000064529

Entity Name: D KOZ A PLUMBER, INC.

FILED  
Jan 09, 2011  
Secretary of State

**Current Principal Place of Business:**

4995 FELICITY WAY  
PALM HARBOR, FL 34685 US

**New Principal Place of Business:**

**Current Mailing Address:**

4995 FELICITY WAY  
PALM HARBOR, FL 34685 US

**New Mailing Address:**

FEI Number: 20-1301762

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LOVE, RANDALL J  
10816 U.S. 19 NORTH, STE. 110  
PORT RICHEY, FL 34668 US

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

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

**OFFICERS AND DIRECTORS:**

Title: PSD  
Name: KOSLOSKI, DARRYL A PSD  
Address: 4995 FELICITY WAY  
City-St-Zip: PALM HARBOR, FL 34685 US

Title: VTD  
Name: KOSLOSKI, GEORGIA  
Address: 4995 FELICITY WAY  
City-St-Zip: PALM HARBOR, FL 34685 US

Title: PSD  
Name: KOSLOSKI, DARRYL A PSD  
Address: 4995 FELECITY WAY  
City-St-Zip: PALM HARBOR, FL 34685 US

Title: PSD  
Name: KOSLOSKI, DARRYL A PSD  
Address: 4995 FELECITY WAY  
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Name: KOSLOSKI, DARRYL A PSD  
Address: 4995 FELECITY WAY  
City-St-Zip: PALM HARBOR, FL 34685 US

Title: PSD  
Name: KOSLOSKI, DARRYL A PSD  
Address: 4995 FELECITY WAY  
City-St-Zip: PALM HARBOR, FL 34685 US

I hereby 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 all other like empowered.

SIGNATURE: DARRYL KOSLOSKI

PSD

01/09/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date