2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000082788

Entity Name: A TRANT PLUMBING SERVICES, INC.

FILED Jan 11, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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P.O. BOX 1037 ESTERO, FL 33928

Current Mailing Address: New Mailing Address:

P.O. BOX 1037 ESTERO, FL 33928

FEI Number: 20-1150870 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:

TRANT, ALICE TRANT, ALICE 31629 LONG ACRES DRIVE STE 2 TRANT, ALICE 7050 BUCKS LANE

SORRENTO, FL 32776 US FORT MYERS, FL 33912 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: 01/11/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 TRANT, ALICE
 Name:
 TRANT, ALICE

 Address:
 962 LOGENBERRY TRAIL
 Address:
 7050 BUCKS LANE

 City-St-Zip:
 WINTER SPRINGS, FL 32708
 City-St-Zip:
 FORT MYERS, FL 33912

 $\label{eq:title:V} {\sf Title:} \qquad {\sf V} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf V} \qquad {\sf (X) Change () Addition}$

 Name:
 TRANT, BRENDAN
 Name:
 TRANT, BRENDAN

 Address:
 962 LOGENBERRY TRIAL
 Address:
 7050 BUCKS LANE

 City-St-Zip:
 WINTER SPRINGS, FL 32708
 City-St-Zip:
 FORT MYERS, FL 33912

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

 Name:
 HUGHES, BLANE
 Name:
 HUGHES, BLANE

 Address:
 286 CURLEW CIRCLE
 Address:
 7050 BUCKS LANE

 City-St-Zip:
 ALTAMONTE SPRINGS, FL 32701
 City-St-Zip:
 FORT MYERS, FL 33912

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ALICE T. TRANT PT 01/11/2005