

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2007 8:00 am
Secretary of State

03-27-2007 90006 009 ***158.75

DOCUMENT # P05000004022

1. Entity Name
MCCUTCHEON PLUMBING, INC.



Principal Place of Business
**2655 EAST DAWSON DR
INVERNESS, FL 34453**

Mailing Address
**2655 EAST DAWSON DR
INVERNESS, FL 34453**

2. Principal Place of Business - No P.O. Box #

2655 E Dawson Dr.

3. Mailing Address

2655 E Dawson Dr

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Inverness, FL

City & State

Inverness, FL

Zip

34453

Country

Citrus

Zip

34453

Country

Citrus

03232007

Chg-P

CR2E034 (12/06)

4. FEI Number

20-2167945

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MCCUTCHEON, RICHARD
357 6TH AVE. W.
BREDENTON, FL 34205**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **MCCUTCHEON, RICHARD**
STREET ADDRESS **357 6TH AVE. W.**
CITY-ST-ZIP **BREDENTON, FL 34205**

TITLE **VP** ☐ Delete
NAME **MCCUTCHEON, ROBERT**
STREET ADDRESS **3943 N BLUEWATER DR.**
CITY-ST-ZIP **HERNANDO, FL 34442**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **S** ☐ Change ☒ Addition
NAME **McCutcheon, Jacques**
STREET ADDRESS **2655 E Dawson Dr.**
CITY-ST-ZIP **Inverness, FL 34453**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Bud McCutcheon

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/23/07

Date

352-637-3944

Daytime Phone #