

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000016585

FILED
Apr 14, 2009
Secretary of State

Entity Name: ALL PRO PLUMBING AND DRAINS INC.

Current Principal Place of Business:

1765 9 MILE RD. STE 1 #223
PENSACOLA, FL 32514 US

New Principal Place of Business:

1765 9 MILE RD
SUITE 1 #223
PENSACOLA, FL 32514 US

Current Mailing Address:

1765 9 MILE RD. STE 1 #223
PENSACOLA, FL 32514 US

New Mailing Address:

1765 9 MILE RD
SUITE 1 #223
PENSACOLA, FL 32514 US

FEI Number: 20-8402026

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NELSON, WESLEY ADAM
1765 9 MILE RD. STE 1 #223
PENSACOLA, FL 32514 US

Name and Address of New Registered Agent:

NELSON, WESLEY ADAM
1765 9 MILE RD
SUITE 1 #223
PENSACOLA, FL 32514 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:

04/14/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DIR () Delete
Name: HARRIS, DAVID
Address: 1765 9 MILE RD. STE 1 #223
City-St-Zip: PENSACOLA, FL 32514 US

Title: VP () Delete
Name: HARRIS, HARRIS
Address: 1765 9 MILE RD. STE 1 #223
City-St-Zip: PENSACOLA, FL 32514 US

Title: DIR () Delete
Name: NELSON, WESLEY ADAM
Address: 1765 9 MILE RD. STE 1 #223
City-St-Zip: PENSACOLA, FL 32514 US

Title: P () Delete
Name: NELSON, WESLEY ADAM
Address: 1765 9 MILE RD. STE 1 #223
City-St-Zip: PENSACOLA, FL 32514 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 ADAM NELSON

DIR

04/14/2009

Electronic Signature of Signing Officer or Director

Date