2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000074073

Entity Name: ALL COUNTY PLUMBING SERVICES OF OCALA, INC

FILED Sep 02, 2009 Secretary of State

Littly Name.	. ALL COUNTY PLOWIDING SERVICES C	or ocala, inc.		
Current Principal Place of Business:		New Principal Place o	New Principal Place of Business:	
2875 S.E. 58TH AVENUE OCALA, FL 344801309		5640 SE 8TH ST. OCALA, FL 34480		
Current Mail	ing Address:	New Mailing Address:	New Mailing Address:	
2875 S.E. 58TH AVENUE OCALA, FL 344801309		P.O. BOX 649 SILVER SPRINGS, FL	P.O. BOX 649 SILVER SPRINGS, FL 34489	
FEI Number:	FEI Number Applied For (X)	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name and Address of	Name and Address of New Registered Agent:	
IRWIN, JULIE 5640 S.E. 8TH OCALA, FL 3			IRWIN, DENNIS M 5640 S.E. 8TH STREET OCALA, FL 344803506 US	
The above na in the State of	amed entity submits this statement for the p f Florida.	ourpose of changing its registered	office or registered agent, or both,	
SIGNATURE: DENNIS IRWIN			09/02/2009	
	Electronic Signature of Registered Age	ent	Date	
	with s. 607.193(2)(b), F.S., the corporation did no aign Financing Trust Fund Contribution ().	t receive the prior notice.		
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Name: IF Address: 56	PT () Delete RWIN, DENNIS M 640 SE 8TH SREET DCALA, FL 344803506	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Address: 50	S () Delete RWIN, JULIE A 640 SE 8TH SREET OCALA, FL 344803506	Title: (Name: Address: City-St-Zip:) Change ()Addition	

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: DENNIS IRWIN P 09/02/2009