

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 20, 2005 8:00 am
Secretary of State

07-05-2005 90220 001 ***150.00
07-20-2005 90024 047 ***400.00

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DOCUMENT # P93000085311 1. Entity Name FERGERSON CONSTRUCTION & PLUMBING, INC.					
Principal Place of Business 3456 N. CITRUS AVE. CRYSTAL RIVER, FL 34428 US			Mailing Address P.O. BOX 640386 BEVERLY HILLS, FL 34464 US		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address P.O. Box 422 Suite, Apt. #, etc.			
City & State Zip		City & State Crystal River, FL Zip 34423		Country Citrus	
4. FEI Number 59-3216753				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				07012005 Chg-P CR2E034 (10/03)	
6. Name and Address of Current Registered Agent MYERS, PATRICIA M 7655 W. GULF TO LAKE HIGHWAY SUITE 12 CRYSTAL RIVER, FL 34429			7. Name and Address of New Registered Agent 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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____					
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees In accordance with s. 607.183(2)(b), F.S., the corporation did not receive the prior notice.			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FERGERSON, JIMMY G P.O. BOX 640386 N/A BEVERLY HILLS, FL 344640386	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Ferguson, Jimmy G P.O. Box 422 Crystal River, FL 34423-0422	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FERGERSON, DEBRA J P.O. BOX 640386 N/A BEVERLY HILLS, FL 344640386	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Ferguson, Debra J P.O. Box 422 Crystal River, FL 34423-0422	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Change ☐ Addition	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Change ☐ Addition	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Change ☐ Addition	☐ Change ☐ Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: <u>Debra J. Ferguson</u> <u>Debra J. Ferguson</u> 7/1/05 352-564-8311 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					