

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000023774

FILED  
Jan 04, 2005  
Secretary of State

Entity Name: TRIPLE S PLUMBING, INC.

## Current Principal Place of Business:

4533 SUNBEAM RD  
UNIT 602  
JACKSONVILLE, FL 32257 US

## New Principal Place of Business:

987 SE SR 100  
KEYSTONE HEIGHTS, FL 32656 US

## Current Mailing Address:

987 SE SR 100  
KEYSTONE HGTS, FL 32656 US

## New Mailing Address:

FEI Number: 59-3242938      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SKINNER, IVAN  
4533 SUNBEAM RD  
UNIT 602  
JACKSONVILLE, FL 32257 US

## Name and Address of New Registered Agent:

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SKINNER, IVAN  
Address: 4533 SUNBEAM ROAD #602  
City-St-Zip: JACKSONVILLE, FL 32257 US

Title: VP ( ) Delete  
Name: SKINNER, STEPHEN  
Address: 4533 SUNBEAM ROAD #602  
City-St-Zip: JACKSONVILLE, FL 32257 US

Title: VP ( ) Delete  
Name: SKINNER, DAVID  
Address: 987 SE SR 100  
City-St-Zip: KEYSTONE HEIGHTS, FL 32656 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:

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: DAVID SKINNER

VP

01/04/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date