

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jan 23, 2006 08:00 AM
Secretary of State**

DOCUMENT # P94000040509

1. Entity Name
COURTNEY PLUMBING, INC.



Principal Place of Business
**28220 COUNTRY RD 561
TAVARES, FL 32778 US**

Mailing Address
**28220 COUNTRY RD 561
TAVARES, FL 32778 US**



01132006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3240982	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

5. Name and Address of Current Registered Agent

**COURTNEY, SCOTT E
12201 S. PUTNEY COURT
LEESBURG, FL 34788**

**DO NOT WRITE
IN THIS SPACE**

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 *Scott Courtney* PRES. SCOTT COURTNEY 1-13-06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing ☐ **\$5.00** May Be
Trust Fund Contribution. Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	COURTNEY, SCOTT E
STREET ADDRESS	12201 S. PUTNEY COURT
CITY-ST-ZIP	LEESBURG, FL 34788

TITLE	D
NAME	COURTNEY, HERBERT F
STREET ADDRESS	27936 LOIS DR
CITY-ST-ZIP	TAVARES, FL 32778

TITLE	D
NAME	COURTNEY, SUSAN
STREET ADDRESS	27936 LOIS DR
CITY-ST-ZIP	TAVARES, FL 32778

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
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: *Scott Courtney* PRES. SCOTT COURTNEY 1-13-06 (352)3433763
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

000000398090
01/27/06-80018-009 158.75

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IN THIS SPACE**