2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 23, 2009
Secretary of State

DOCUMENT# P94000041854

Entity Name: CENTRAL FLORIDA PLUMBING SUPPLY, INC.

Current Principal Place of Business:

14435 DIVISION ST
GROVELAND, FL 34736 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 120824
CLERMONT, FL 34712 US

New Mailing Address:

P O BOX 121431
CLERMONT, FL 34712 US

FEI Number: 59-3249341 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LAWSON, CHARLENE
1803 ROSEWOOD DR
CLERMONT, FL 34711 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: LAWSON, CHARLENE H
Address: 1803 ROSEWOOD DR
City-St-Zip: CLERMONT, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: LAWSON, CHARLENE H
Address: 1803 ROSEWOOD DR
City-St-Zip: CLERMONT, FL 34711

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: CHARLENE LAWSON P 06/23/2009

Electronic Signature of Signing Officer or Director Date