2006 FOR PROFIT CORPORATION

FILED **ANNUAL REPORT** Jan 27, 2006 08:00 AN **DOCUMENT # P94000045303 Secretary of State** BOB BARNES PLUMBING, INC. Mailing Address Principal Place of Business 1217 RIDGEGROVE DRIVE S. 1217 RIDGEGROVE DRIVE S. PALM HARBOR, FL 34683 US PALM HARBOR, FL 34683 US No Chg-P CR2E034 (11/05) 01242006 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3250017 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PEASE, THOMAS E DO NOT WRITE 29605 U.S. HWY. 19 N. **SUITE 130** IN THIS SPACE CLEARWATER, FL 34621 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. DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS TITLE NAME BARNES, ROBERT B JR 1217 RIDGEGROVE DRIVE S. STREET ADDRESS CITY-ST-ZIP PALM HARBOR, FL TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TILE NAME STREET ADDRESS

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.

CITY-ST-ZIP TITLE NAME STREET AGORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CRTY-ST-ZIP

ert B. Barnes Jr.