

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000004161

Entity Name: POWELL PLUMBING CO. INC.

FILED
Apr 27, 2007
Secretary of State

Current Principal Place of Business:

11999 WHITEHOUSE ROAD
TALLAHASSEE, FL 32317

New Principal Place of Business:

Current Mailing Address:

11999 WHITEHOUSE ROAD
TALLAHASSEE, FL 32317 US

New Mailing Address:

FEI Number: 59-3287951

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POWELL, ROBERT
11999 WHITEHOUSE RD
TALLAHASSEE, FL 32317 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: POWELL, WILLIAM R.
Address: 11999 WHITE HOUSE RD.
City-St-Zip: TALLAHASSEE, FL 32317

Title: VP () Delete
Name: POWELL, WILLIAM R JR.
Address: 1201 WHITE HOUSE RD.
City-St-Zip: TALLAHASSEE, FL 32317

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: POWELL, WILLIAM R.
Address: 11999 WHITEHOUSE RD.
City-St-Zip: TALLAHASSEE, FL 32317

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ROBERT POWELL

P

04/27/2007

Electronic Signature of Signing Officer or Director

Date