


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 09, 2005 8:00 am**  
**Secretary of State**

02-09-2005 90060 035 \*\*\*150.00

<b>DOCUMENT # P95000039545</b> 1. Entity Name <b>SUN STATE PLUMBING, INC.</b>					
Principal Place of Business <b>PO BOX 2169</b> <b>AUBURNDALE FL 33823</b>			Mailing Address <b>PO BOX 2169</b> <b>AUBURNDALE FL 33823</b>		
2. Principal Place of Business <b>305 Gandy Road</b>		3. Mailing Address  			
Suite, Apt. #, etc.  		Suite, Apt. #, etc.  			
City & State <b>Auburn DALE FL</b>		City & State  		4. FEI Number <b>59-3319921</b>	
Zip <b>33823</b>		Country <b>FL</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>WALDRON, CARL</b> <b>241 LAKE TENNESSEE DR. 4998 Juliana Reserve Dr.</b> <b>AUBURNDALE FL 33823</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee Will Be \$550.00</b> <b>Make Check Payable to Florida Department of State</b>				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <input type="checkbox"/> Delete <b>WALDRON, CARL</b> <b>241 TENNESSEE ST 4998 Juliana Reserve Dr.</b> <b>AUBURNDALE FL 33823</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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1st MOORE CR2E034 (10/04)

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**2/2/05 (863) 967-6970**  
Date Daytime Phone #