2004 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 22, 2004 08:00 AM Secretary of State DOCUMENT # P95000063091 1. Entity Name RUSTY'S PLUMBING SERVICES, INC. Principal Place of Business Mailing Address 16640 BACHMAN AVE #6 13176 COOPER ROAD HUDSON, FL 34667 SPRING HILL, FL 34609 US 2. Principal Place of Business 3. Mailing Address Sulte, Apt. #, etc. Suite, Apt. #. etc. 03012004 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 59-3332726 Not Applicable Zip Country Zło Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name AVENEY, RUSSELL T Street Address (P.O. Box Number is Not Acceptable) 13176 COOPER ROAD SPRING HILL, FL 34609 City 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 objections of registered agent. SIGNATURE Signature, typed at printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 \Box Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. DPS ☐ Delete TELE ☐ Change Addition me NAME AVENEY, RUSSELL T MAME U00000094071 STREET ADDRESS 13176 COOPER ROAD STREET ADORESS 03/22/04-80044-015 150.00 ONY- ST-78P CRTY-ST 7IP SPRING HILL, FL 34609 Delete ☐ Change ☐ Addition TITLE TITLE AVENEY, CATHERINE A MAME NAME 13176 COOPER ROAD STREET ADDRESS STREET ADDRESS CITY-ST-789 CITY-ST-ZIP SPRING HILL, FL 34609 Delete TITLE ☐ Change ☐ Addition सारह NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZEP CRY-ST-ZIP ☐ Change Addition Delete TITLE m = NAME MAMP STREET ADDRESS STREET ADDRESS CRTY- ST-ZEP CRY-ST-78P Delete TITLE Change Addition TOT F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Cary-ST-ZIP Delete TITLE Change ☐ Addition 789.5 NAME NAM-STREET ADDRESS STREET ADDRESS CRTY-ST-ZIP CRY-ST-ZIP I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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

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