## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P96000001281

Entity Name: NAVE PLUMBING, INC.

FILED Mar 16, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
POST OFFICE BOX 247 SANIBEL, FL 33957				2244 PERIWINKLE WAY SUITE 13 SANIBEL, FL 33957			
Current Mailing Address:				New Mailing Address:			
POST OFF SANIBEL,	FICE BOX 247 FL 33957						
FEI Number:	: 65-0631733	FEI Number Applied For ( )	FEI Nun	nber Not Appli	cable ( )	Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:		Name and	Address of N	lew Registered Agent:	
NAVE, CHARLES A SR. 2244-A PERIWINKLE WAY SANIBEL, FL 33957 US				NAVE, CHARLES A SR. 2244 PERIWINKLE WAY SUITE 13 SANIBEL, FL 33957 US			
	named entity s e of Florida.	submits this statement for the pur	rpose o	f changing it	s registered o	ffice or registered agent, or bot	:h,
SIGNATUF	RE:					03/16/2007	
	Electron	ic Signature of Registered Agent	t			Date	_
Election Can	npaign Financing	Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	NAVE, CHARLE POST OFFICE SANIBEL, FL 3	BOX 247 N/A 39570247		Title: Name: Address: City-St-Zip:	. ,	) Change ()Addition	
Title: Name: Address: City-St-Zip:	STD () NAVE, GOLDIE POST OFFICE SANIBEL, FL 3	BOX 247 N/A		Title: Name: Address: City-St-Zip:	( )	) Change ()Addition	
Title: Name: Address: City-St-Zip:	( )	Delete		Title: Name: Address: City-St-Zip:	V () NAVE, CURTIS 787 DUNLOP R SANIBEL, FL 3	ROAD	
Title: Name: Address: City-St-Zip:	( )	Delete		Title: Name: Address: City-St-Zip:	V () TABOR, ROGE 232 S.E. 31ST CAPE CORAL,	STREET	
Title: Name: Address: City-St-Zip:	( )	Delete		Title: Name: Address: City-St-Zip:	V () RIDER, YVONN 785 DUNLOP R SANIBEL, FL 3	ROAD	
Title: Name: Address: City-St-Zip:	( )	Delete		Title: Name: Address: City-St-Zip:	V () NAVE, JR, CHA 9393 PEACEFL SANIBEL, FL 3	JL DRIVE	

I hereby certify that the information supplied with this filing does not qualify for the 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: CHARLES ALLEN NAVE, SR. P 03/16/2007