2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000028732

Entity Name: MAY PLUMBING COMPANY, INC.

FILED Feb 16, 2006 Secretary of State

2901 MAIDEN LN 3853 ABERDEEN DRIVE SARASOTA, FL 34231 US SARASOTA, FL 34253 US

Current Mailing Address: New Mailing Address:

PO BOX 20997

SARASOTA, FL 34276 US

FEI Number: 65-0737275 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LAVENDER, KATHRYN M

144 MYAKKA DR

VENICE, FL 34293 US

COMPTON, JOHN M

1819 MAIN STREET, SUITE 610

SARASOTA, FL 34236 US

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: JOHN M. COMPTON 02/16/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: PD (X) Change () Addition Name: MAY, FREDDIE J Name: MAY, FREDDIE J

Address: 105 MILLER DR NE Address: 105 MILLER DR NE
City-St-Zip: MOORE HAVEN, FL 33471 City-St-Zip: MOORE HAVEN, FL 33471

Title: D () Delete Title: VPD (X) Change () Addition Name: MAY, PATRICIA L Name: MAY, PATRICIA L

 Name:
 MAY, PATRICIA L

 Address:
 105 MILLER DR NE

 City-St-Zip:
 MOORE HAVEN, FL 33471

 City-St-Zip:
 MOORE HAVEN, FL 33471

Title: D () Delete Title: STD (X) Change () Addition

 Name:
 LAVENDER, KATHRYN M
 Name:
 MAY, DAVID A

 Address:
 144 MYAKKA DRIVE
 Address:
 4040 PRADO DRIVE

 City-St-Zip:
 VENICE, FL 34293
 City-St-Zip:
 SARASOTA, FL 34235

Title: D (X) Delete Title: () Change () Addition

 Name:
 MAY, DAVID A
 Name:

 Address:
 4040 PRADO
 Address:

 City-St-Zip:
 SARASOTA, FL 34235
 City-St-Zip:

Title: D (X) Delete Title: () Change () Addition

 Name:
 LAVENDAR, JACK K
 Name:

 Address:
 144 MYAKKA DRIVE
 Address:

 City-St-Zip:
 VENICE, FL 34293
 City-St-Zip:

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: FREDDIE J. MAY, PRESIDENT PD 02/16/2006

Electronic Signature of Signing Officer or Director

Date