

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000059267

FILED
Mar 21, 2009
Secretary of State

Entity Name: KEY WEST PLUMBING, INCORPORATED

Current Principal Place of Business:

1804 SEIDENBERG AVE
KEY WEST, FL 33040 US

New Principal Place of Business:

3606 EAGLE AVE
KEY WEST, FL 33040 US

Current Mailing Address:

1804 SEIDENBERG AVE
KEY WEST, FL 33040 US

New Mailing Address:

3606 EAGLE AVE
KEY WEST, FL 33040 US

FEI Number: 59-1630657

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BARROSO, MADELEINE L
1804 SEIDENBERG AVE.
KEY WEST, FL 33040 US

Name and Address of New Registered Agent:

BARROSO, MADELEINE L
1804 SEIDENBERG AVE.
KEY WEST, FL 33040 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: MADELEINE L. BARROSO

03/21/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BARROSO, GREGORY A
Address: 3606 EAGLE AVE.
City-St-Zip: KEY WEST, FL 33040

Title: SD () Delete
Name: BARROSO, MADELEINE L
Address: 1804 SEIDENBERG AVE.
City-St-Zip: KEY WEST, FL 33040

Title: VTD () Delete
Name: BARROSO, BLANE J
Address: 2606 EAGLE AVE.
City-St-Zip: KEY WEST, FL 33040

Title: VD (X) Delete
Name: BARROSO, PATRICK K
Address: 2606 EAGLE AVE.
City-St-Zip: KEY WEST, FL 33040

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VSD (X) Change () Addition
Name: BARROSO, PATRICK K
Address: 3606 EAGLE AVE
City-St-Zip: KEY WEST, FL 33040

Title: VTD (X) Change () Addition
Name: BARROSO, BLANE J
Address: 3606 EAGLE AVE.
City-St-Zip: KEY WEST, FL 33040

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: GREGORY A. BARROSO

PD

03/21/2009

Electronic Signature of Signing Officer or Director

Date