2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2008
Secretary of State

DOCUMENT# P97000083958

Entity Name: TED BENEDIX PLUMBING, INC.

Current Principal Place of Business:

11940 ACOSTA ROAD
JACKSONVILLE, FL 32223

New Principal Place of Business:

Current Mailing Address:

11940 ACOSTA ROAD
JACKSONVILLE, FL 32223

New Mailing Address:

FEI Number: 59-3470941 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BENEDIX, EDWARD
11940 ACOSTA ROAD
JACKSONVILLE, FL 32223 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete
Name: BENEDIX, EDWARD
Address: 11940 OLD ACOSTA ROAD
City-St-Zip: JACKSONVILLE, FL 32223

Title: SD ( ) Delete
Name: BENEDIX, GWENDOLYN
Address: 11940 OLD ACOSTA ROAD
City-St-Zip: JACKSONVILLE, FL 32203

Title: VP (X) Delete
Name: BENEDIX, DENNIS L
Address: 4104 DAYES RD.
City-St-Zip: JACKSONVILLE, FL 32207

Title: TREA (X) Delete
Name: BENEDIX, EDWARD C TREASUR
Address: 9645 BAY MEADOWS RD. APT 829
City-St-Zip: JACKSONVILLE,, FL 32256

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: GWENDOLYN J. BENEDIX SD 04/14/2008

Electronic Signature of Signing Officer or Director — Date