

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Feb 15, 2007 8:00 am
Secretary of State**

01-19-2007 90032 034 ***150.00

DOCUMENT # P99000044683

1. Entity Name
PUFFENBURGER PLUMBING, INC.



Principal Place of Business
**1304 16TH STREET WEST
BRADENTON, FL 34205**

Mailing Address
**1304 16TH STREET WEST
BRADENTON, FL 34205**



01042007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0925067	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

II. Name and Address of Current Registered Agent

**PUFFENBERGER, KENNETH L SR.
1304 16TH STREET WEST
BRADENTON, FL 34205**

**DO NOT WRITE
IN THIS SPACE**

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 obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when renewing) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	POST PUFFENBURGER, KENNETH L SR. 1304 -16TH ST W BRADENTON, FL 34205
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED AGENT OR RECEIVER

1-4-07 941-720-5553
Date Daytime Phone #