

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90366 016 ***150.00

DOCUMENT # P99000049153

1. Entity Name
BONITA SPRINGS PLUMBING, INC.



Principal Place of Business
~~24331 PRODUCTION CIR.~~
BONITA SPRINGS, FL 34135

Mailing Address
~~24331 PRODUCTION CIR.~~
~~BONITA SPRINGS, FL 34135~~

SAME

2. Principal Place of Business
~~14634 Bonita Boulevard~~
Suite, Apt. #, etc.

3. Mailing Address
21159 Braxfield Loop
Suite, Apt. #, etc.

City & State
~~Bonita Springs FL~~
Zip Country
~~34135 USA~~

City & State
Estero FL
Zip Country
33928 USA

04272006

Chg-P

CR2E034 (11/05)

4. FEI Number
65-0920174

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

MARCHETTI, JULIA R
~~24331 PRODUCTION CIR.~~
BONITA SPRINGS, FL 34135

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

21159 Braxfield Loop

City **Estero**

FL

Zip Code **33928**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME MARCHETTI, MICHAEL J
STREET ADDRESS ~~24331 PRODUCTION CIRCLE~~
CITY-ST-ZIP ~~BONITA SPRINGS, FL 34135~~

TITLE D ☐ Delete
NAME MARCHETTI, JULIA
STREET ADDRESS ~~24331 PRODUCTION CIRCLE~~
CITY-ST-ZIP ~~BONITA SPRINGS, FL 34135~~

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME **21159 Braxfield Loop**
STREET ADDRESS **Estero FL 33928**
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME **21159 Braxfield Loop**
STREET ADDRESS **Estero FL 33928**
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 empowerment.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/06 239-947-7650
Date Daytime Phone #