

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000083900

FILED
Aug 28, 2007
Secretary of State

Entity Name: CLAY'S PLUMBING SERVICE, INC.

Current Principal Place of Business:

2590 17TH STREET
STE J
SARASOTA, FL 34234

New Principal Place of Business:

Current Mailing Address:

2590 17TH STREET
STE J
SARASOTA, FL 34234

New Mailing Address:

FEI Number: 65-0949373 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZUKNICK, CLAYTON
3137 BAY STREET
SARASOTA, FL 34237 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ZUKNICK, CLAY
Address: 3137 BAY STREET
City-St-Zip: SARASOTA, FL 34237

Title: VP () Delete
Name: ZUKNICK, JANET
Address: 3137 BAY STREET
City-St-Zip: SARASOTA, FL 34237

Title: S () Delete
Name: ZUKNICK, MATT
Address: 1905 MASHAL DRIVE
City-St-Zip: SARASOTA, FL 34239

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: ZUKNICK, JANET M
Address: 3137 BAY STREET
City-St-Zip: SARASOTA, FL 34237

Title: S (X) Change () Addition
Name: ZUKNICK, MATT W
Address: 3030 LINWOOD DR.
City-St-Zip: SARASOTA, FL 34232

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: CLAY ZUKNICK

P

08/28/2007

Electronic Signature of Signing Officer or Director

_____ Date