

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S02975

FILED  
Jul 01, 2011  
Secretary of State

Entity Name: WOLFE PLUMBING, INC.

**Current Principal Place of Business:**

11430 NW 15 AVE.  
BRANFORD, FL 32008

**New Principal Place of Business:**

**Current Mailing Address:**

11430 NW 15 AVE.  
BRANFORD, FL 32008

**New Mailing Address:**

FEI Number: 65-0224898

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WOLFE, SCOTT  
11430 NW 15 AVE.  
BRANFORD, FL 32008 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: WOLFE, SCOTT  
Address: 11430 NW 15 AVE.  
City-St-Zip: BRANFORD, FL 32008

Title: V  
Name: WOLFE, MELANIE E  
Address: 11430 NW 15TH AVENUE  
City-St-Zip: BRANFORD, FL 32008

I hereby 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 all other like empowered.

SIGNATURE: SCOTT WOLFE

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

OWNE

07/01/2011

\_\_\_\_\_ Date