2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2008 8:00 am
Secretary of State
01-25-2008 90038 030 ***150.00

DOCUMENT # S44906

1. Entity Name
RONALD L. BRADBURY PLUMBING CO., INC.

Principal Place of Business	Mailing Address
1692 DOLORES DR KISSIMMEE, FL 34746 US	39736 CR 452 LEESBURG, FL 34788 US

01092008 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
39736 CR 452			
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State: LEESBURG, FL		City & State	
Zip: 34788	Country: US	Zip	Country

4. FEI Number: 59-3071565 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BRADBURY, RONALD 39736 COUNTY ROAD 452 LEESBURG, FL 34788	Name: CATHERINE A. BRADBURY Street Address (P.O. Box Number is Not Acceptable): 39736 CR 452 City: LEESBURG FL Zip Code: 34788

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: Catherine A Bradbury CATHERINE A. BRADBURY P/D 1/20/08
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, 2008 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP BRADBURY, RONALD L 39736 COUNTY RAOD 452 LEESBURG, FL 34788	☒ Delete DECEASED	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DSTV BRADBURY, CATHERINE A 39736 COUNTY ROAD 452 LEESBURG, FL 34788	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DPST CATHERINE A. BRADBURY 39736 CR 452 LEESBURG, FL 34788	☒ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: Catherine A Bradbury CATHERINE A. BRADBURY PRES 1/20/08 (352) 669-7945
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #