

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S61299

FILED  
Apr 30, 2004  
Secretary of State

**Entity Name:** SHORELINE PLUMBING SERVICES, INC.

**Current Principal Place of Business:**

835 11TH ST N.W.  
NAPLES, FL 341202066 US

**New Principal Place of Business:**

PO BOX 1111586  
NAPLES, FL 34108 US

**Current Mailing Address:**

835 11TH ST N.W.  
NAPLES, FL 341202066 US

**New Mailing Address:**

PO BOX 1111586  
NAPLES, FL 34108 US

**FEI Number:** 65-0270947

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WELLS, LAWRON  
835 11TH ST N.W.  
NAPLES, FL 341202066 US

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

WELLS, LAWRON  
PO BOX 1111586  
NAPLES, FL 34108 US

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:** LAWRON WELLS

04/30/2004

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: WELLS, LAWRON  
Address: 835 11TH ST N.W.  
City-St-Zip: NAPLES, FL 341202066 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: WELLS, LAWRON  
Address: PO BOX 1111586  
City-St-Zip: NAPLES, FL 34108 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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:** LAWRON WELLS

DP

04/30/2004

Electronic Signature of Signing Officer or Director

Date