		<del>-</del>	-	FILED
DOCUMENT # V00263  1. Entity Name			A. C.	Jan 31, 2006 08:00 AM
R.L. JOHNSON PLUMBING COMPANY, INC.				Secretary of State
Principal Plac	e of Business	Mailing Address		
14403 N MAIN ST		14403 N MAIN ST		
JACKSONV	ILLE FL 32218	JACKSONVILLE FL 32	218	
2. Principal Place of Business		3. Mailing Address		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		1st MOORE CR2E034 (10/05)
City & Stat		City & State	<del></del>	4. FEI Number         Applied For Not Applicat
Zip	Country	Zip	Country	5. Certificate of Status Desired See Required Fee Required
	6. Name and Address of Current	Registered Agent	Name	7. Name and Address of New Registered Agent
JOHNSON, MARSHA D 14403 N. MAIN ST				ess (P.O. Box Number is Not Acceptable)
	KSONVILLE FL 32218			
			City	FL Zip Code
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				
After	ILE NOW!!! FEE IS \$150.00 May 1, 2006 Fee Will Be \$550.00	)		9. Election Campaign Financing \$5.00 May Financing Trust Fund Contribution. Added to Fees
Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  11.				ADDITION OF THE SECOND AND DISTANCE IN
10. TITLE	OFFICERS AND	Delete	TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
NAME	JOHNSON, MARSHA D	<u> </u>	NAME	\$#B1
STREET ADDRESS CITY-ST-ZIP	14403 N. MAIN ST JACKSONVILLE FL 32218		STREET ADDRESS CITY-ST-ZIP	12/08/05 150.00
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CITY-ST-ZIP	and the skine of t	Later Director of the Control of the	CITY-ST-ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 of 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				

MARSHA D. JOHNSON

**SIGNATURE** 

1-26-06