

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 487795

FILED
Aug 29, 2006
Secretary of State

Entity Name: STRUCTURAL WATERPROOFING COMPANY OF FLORIDA, INC.

Current Principal Place of Business:

300 PARK AVE N
SUITE 100
WINTER PARK, FL 32789 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 140
WINTER PARK, FL 32790 US

New Mailing Address:

FEI Number: 59-1631257

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, LARRY E
300 N PARK AVE
#200
WINTER PARK, FL 32790 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WILLIAMS, LARRY E
Address: 300 N PARK AVE-PENTHOUSE STE
City-St-Zip: WINTER PARK, FL 32789

Title: S () Delete
Name: WILLIAMS, JOY M
Address: 300 N PARK AVE-PENTHOUSE STE
City-St-Zip: WINTER PARK, FL 32789

Title: V () Delete
Name: BILINSKI, MICHAEL E
Address: 6160 PLYMOUTH SORRENTO RD
City-St-Zip: APOPKA, FL 32712

Title: VP () Delete
Name: WILLIAMS, DAVID
Address: 300 PARK AVE. N.
City-St-Zip: WINTER PARK, FL 32789

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVID H. WILLIAMS

VP

08/29/2006

Electronic Signature of Signing Officer or Director

Date