2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 21, 2008 08:00 AM
Secretary of State

DOCUMENT # 487795

1. Entity Name
STRUCTURAL WATERPROOFING COMPANY, INC.

Principal Place of Business	Mailing Address
300 GARFIELD AVENUE SUITE 200 WINTER PARK, FL 32789 US	PO BOX 140 WINTER PARK, FL 32790 US

08192008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1631257
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

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

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
Due by September 12, 2008

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	WILLIAMS, LARRY E
STREET ADDRESS	300 N PARK AVE-PENTHOUSE STE
CITY-ST-ZIP	WINTER PARK, FL 32789
TITLE	S
NAME	WILLIAMS, JOY M
STREET ADDRESS	300 N PARK AVE-PENTHOUSE STE
CITY-ST-ZIP	WINTER PARK, FL 32789
TITLE	V
NAME	BILINSKI, MICHAEL E
STREET ADDRESS	6160 PLYMOUTH SORRENTO RD
CITY-ST-ZIP	APOPKA, FL 32712
TITLE	VP
NAME	WILLIAMS, DAVID
STREET ADDRESS	300 GARFIELD AVENUE
CITY-ST-ZIP	WINTER PARK, FL 32789
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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08/21/08-80002-015 150.00

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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: x _____ 8/10/08 407-645-2021
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #