

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000042022

Entity Name: EROSION CONTROL, INC.

FILED
May 01, 2009
Secretary of State

Current Principal Place of Business:

2620 N. TAMIAMI TRAIL
#2
NORTH FORT MYERS, FL 33903

New Principal Place of Business:

Current Mailing Address:

2620 N. TAMIAMI TRAIL
#2
NORTH FORT MYERS, FL 33903

New Mailing Address:

FEI Number: 34-1983456 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHINDLER, MICHELE L
2620 N. TAMIAMI TRL UNIT 2
NORTH FORT MYERS, FL 33903 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

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: SCHINDLER, RICHARD
Address: 2620 N TAMIAMI TRAIL UNIT 2
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: VD () Delete
Name: FARQUER, RUSTY
Address: 2620 N TAMIAMI TRAIL UNIT 2
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: PSTD () Delete
Name: SCHINDLER, MICHELE
Address: 2620 N TAMIAMI TRAIL UNIT 2
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: D () Delete
Name: MCALLISTER, ISLA
Address: 7619 EBSON DR
City-St-Zip: NORTH FORT MYERS, FL 33917

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP/D (X) Change () Addition
Name: SCHINDLER, RICHARD L
Address: 2620 N TAMIAMI TRAIL UNIT 2
City-St-Zip: NORTH FORT MYERS, FL 33903 US

Title: D (X) Change () Addition
Name: FARQUER, RUSTY
Address: 2620 N TAMIAMI TRAIL UNIT 2
City-St-Zip: NORTH FORT MYERS, FL 33903 US

Title: PSTD (X) Change () Addition
Name: SCHINDLER, MICHELE L
Address: 2620 N TAMIAMI TRAIL UNIT 2
City-St-Zip: NORTH FORT MYERS, FL 33903 US

Title: D (X) Change () Addition
Name: MCALLISTER, ISLA
Address: 7619 EBSON DR
City-St-Zip: NORTH FORT MYERS, FL 33917 US

I hereby certify that the information supplied with this filing does not qualify 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: MICHELE L. SCHINDLER

P/D

05/01/2009

Electronic Signature of Signing Officer or Director

_____ Date