2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 387120

FILED Jan 26, 2007 Secretary of State

Entity Name: ANDREWS FILTER AND SUPPLY CORPORATION

Current Principal Place of Business: New Principal Place of Business: 2309 COOLIDGE AVENUE ORLANDO, FL 32804 **Current Mailing Address: New Mailing Address:** 2309 COOLIDGE AVENUE ORLANDO, FL 32804 FEI Number: 59-1359254 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ANDREWS, WALLACE W. 1509 SHADWELL CR. HEATHROW, FL 32764 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition ANDREWS, WALLACE W, Name: Name: 1509 SHADWELL CR. Address: Address: HEATHROW, FL City-St-Zip: City-St-Zip: Title: STD Title: () Delete () Change () Addition Name: ANDREWS, SHIRLEY W. Name: 1509 SHADWELL CR. Address: Address: HEATHROW, FL City-St-Zip: City-St-Zip: Title: Title: VD () Delete () Change () Addition ANDREWS, W. LEE, Name: Name: 8286 DAY LILLY PLACE Address: Address: City-St-Zip: SANFORD, FL 32771 City-St-Zip: Title: VD () Delete Title: (X) Change () Addition ANDREWS, MARK D., ANDREWS, MARK D., Name: Name: Address: 257 HAZELTINE DR Address: 5199 DORWIN PLACE City-St-Zip: DEBARY, FL 32713 City-St-Zip: ORLANDO, FL 32814

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: WALLACE W ANDREWS PRES 01/26/2007