

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000107505

Entity Name: HOLTZ WATER SERVICES, INC.

Current Principal Place of Business:

6223 POPLAR GROVE DR
PORT ORANGE, FL 32127

Current Mailing Address:

6223 POPLAR GROVE DR
PORT ORANGE, FL 32127

FEI Number: 59-3548492

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HOLTZ, KEVIN RMR
6223 POPLAR GROVE DRI
PORT ORANGE, FL 32127 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

Officer/Director Detail :

Title P/D
Name HOLTZ, LOU
Address 9209 CROMWELL PARK PLACE
City-State-Zip: ORLANDO FL 32827

Title V/D
Name HOLTZ, KEVIN
Address 6223 POPLAR GROVE DR
City-State-Zip: PORT ORANGE FL 32127

Title C/D
Name HOLTZ, BETH
Address 9209 CROMWELL PARK PLACE
City-State-Zip: ORLANDO FL 32827

Title S
Name MESSAGLIA, MICHAEL
Address 9453 NORTH STATE RD 267
City-State-Zip: BROWNSBURG IN 46112

Title D
Name ALTENBAUMER, LUANNE
Address 22615 JADEBROOK COURT
City-State-Zip: KATY TX 77494

Title T
Name HOLTZ, KELLY M
Address 6223 POPLAR GROVE DRIVE
City-State-Zip: PORT ORANGE FL 32127

I hereby 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 all other like empowered.

SIGNATURE: KEVIN HOLTZ

V/D

04/26/2013

Electronic Signature of Signing Officer/Director Detail

Date