

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 244251

Entity Name: FLORIDA SEPTIC, INC.

FILED  
Jan 26, 2007  
Secretary of State

## Current Principal Place of Business:

5757 SE 211TH STREET  
HAWTHORNE, FL 32640

## New Principal Place of Business:

## Current Mailing Address:

P. O. BOX 545  
HAWTHORNE, FL 32640 US

## New Mailing Address:

FEI Number: 59-1091650

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VAUSE, DULCIE I.  
5757 SE 211TH STREET  
HAWTHORNE, FL 32640 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: PD ( ) Delete  
Name: VAUSE, JOAN ELLEN,  
Address: 5757 SE 211TH STREET  
City-St-Zip: HAWTHORNE, FL

Title: VD ( ) Delete  
Name: PALMER, SUSAN VAUSE  
Address: 5757 SE 211TH STREET  
City-St-Zip: HAWTHORNE, FL

Title: STD ( ) Delete  
Name: VAUSE, DULCIE I  
Address: 5757 SE 211TH STREET  
City-St-Zip: HAWTHORNE, FL

Title: ATD ( ) Delete  
Name: VAUSE, NANCY  
Address: 5757 SE 211TH STREET  
City-St-Zip: HAWTHORNE, FL

## 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: JOAN ELLEN VAUSE

PD

01/26/2007

Electronic Signature of Signing Officer or Director

Date