

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2004 8:00 am
Secretary of State

05-05-2004 90248 011 ***150.00

DOCUMENT # 410801	
1. Entity Name AUTOMATIC WATER CONDITIONING INC	



Principal Place of Business 5720 U.S. 1 VERO BEACH, FL 32967	Mailing Address 5720 U.S. 1 VERO BEACH, FL 32967
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04302004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1424943	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent ULRICH, DANIEL E. 4320 U.S. 1 5720 US 1 VERO BEACH, FL 32967
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**DO NOT WRITE
IN THIS SPACE**

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

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD ULRICH, DANIEL E. 4320 U.S. 1 5720 US 1 VERO BEACH, FL 32967
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ULRICH, CAROL A. 4320 U.S. 1 5720 US 1 VERO BEACH, FL 32967
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HOOVER JR, CHARLES F 116-16TH AVE VERO BEACH, FL 32962
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ULRICH, JEFFREY R 2045-5TH STREET VERO BEACH, FL 32962
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Daniel E. Ulrich 4/30/04 772/5621631
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #