2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 570663

203 WEST CANAL DR

City-St-Zip:

PALM HARBOR, FL

PALM HARBOR, FL 34684

Current Principal Place of Business:

FILED Jan 26, 2007 Secretary of State

US

New Principal Place of Business:

TARPON SPRINGS, FL 34688

503 AUSTIN DR

Entity Name: BILLINGS PUMPING AND SEPTIC TANK SERVICE, INC.

US

Current Mailing Address: New Mailing Address: 203 WEST CANAL DR. 503 AUSTIN DR TARPON SPRINGS, FL 34688 PALM HARBOR, FL 34684 US US FEI Number: 59-1822221 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: FROHLICH, SCOTT E FROHLICH, SCOTT E 203 WEST CANAL DRIVE 503 AUSTIŃ DRIVE PALM HARBOR, FL 34684 US TARPON SPRINGS, FL 34688 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: KAREN FROHLICH 01/26/2007 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition FROHLICH, RONALD E., Name: Name: 1320 DAFFODIL PL, APT 4 Address: Address: City-St-Zip: DUNEDIN, FL 34698 City-St-Zip: Title: Title: () Delete (X) Change () Addition Name: FROHLICH, KAREN L Name: FROHLICH, KAREN L 203 WEST CANAL DRIVE 503 AUSTIN DRIVE Address: Address: PALM HARBOR, FL TARPON SPRINGS, FL 34688 City-St-Zip: City-St-Zip: () Delete Title: Title: (X) Change () Addition FROHLICH, SCOTT Name: FROHLICH, SCOTT Name: 203 WEST CANAL DRIVE 503 AUSTIN DRIVE Address: Address:

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.

City-St-Zip:

TARPON SPRINGS, FL 34688

SIGNATURE: KAREN FROHLICH S 01/26/2007