2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000005773

Entity Name: APPLIED ENERGY MANAGEMENT, INC.

FILED Apr 28, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 14 PINE STREET 130 QUARRY HILL ROAD LEE, MA 01238 STROCKBRIDGE, MA 01262 **Current Mailing Address: New Mailing Address:** PO BOX 189 130 QUARRY HILL ROAD STOCKBRIDGE, MA 01262 LEE, MA 01238 FEI Number: 04-3095032 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: CORPORATION SERVICE COMPANY 1201 HAYS ST TALLAHASSEE, FL 32301 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: (X) Change () Addition () Delete Title: GLICK, STEPHEN GLICK, STEPHEN Name: Name: 258 GREAT BARRINGTON RD. 130 QUARRY HILL RD Address: Address: City-St-Zip: HOUSATONIC, MA 01236 City-St-Zip: LEE. MA 01238 Title: Title: () Delete (X) Change () Addition Name: O'ROURKE, JOHN Name: O'ROURKE, JOHN 14 PINE STREET P O BOX 189 130 QUARRY HILL ROAD Address: Address: STOCKBRIDGE, MA 01262 LEE, MA 01238 City-St-Zip: City-St-Zip:

Title: Title: CFOT () Delete CFOT (X) Change () Addition Name:

DUPONT, ERIC DUPONT, ERIC Name:

14 PINE STREET P O BOX 189 130 QUARRY HILL ROAD Address: Address: City-St-Zip:

STOCKBRIDGE, MA 01262 City-St-Zip: LEE, MA 01238

Title: () Delete Title: (X) Change () Addition

GLICK, STEPHAN GLICK, STEPHEN Name: Name: 14 PINE STREET P O BOX 189 Address: Address: 130 QUARRY HILL ROAD

City-St-Zip: City-St-Zip: STOCKBRIDGE, MA 01262 LEE, MA 01238

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: ERIC DUPONT **CFO** 04/28/2006