

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 05, 2008 08:00 AM
Secretary of State

DOCUMENT # F06000003835		
1. Entity Name MUELLER WATER PRODUCTS, INC.		
Principal Place of Business 110 CORPORATE DR., SUITE 10 PORTSMOUTH, NH 03801	Mailing Address 110 CORPORATE DR., SUITE 10 PORTSMOUTH, NH 03801	



04142008 No Chg-P CR2E034 (11/05)

4. FEI Number 20-3547095	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525	DO NOT WRITE IN THIS SPACE
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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, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

0000000349195
06/03/08-80019-013 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO HYLAND, GREGORY E 1200 ABERNATHY ROAD, NE ATLANTA, GA 30328
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C HYLAND, GREGORY E 1200 ABERNATHY ROAD, NE ATLANTA, GA 30328
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BOYCE, DONALD N 1200 ABERNATHY ROAD, NE ATLANTA, GA 30328
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CLARK, HOWARD L 1200 ABERNATHY ROAD, NE ATLANTA, GA 30328
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS BARKER, ROBERT 1200 ABERNATHY ROAD NE ATLANTA, GA 30328
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT SMITH, WALTER A 1200 ABERNATHY ROAD, NE ATLANTA, GA 30328

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/08

(770) 266-4200

Robert Barker, Corporate Secretary