## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F07328

Entity Name: SOLAR SANITATION, INC.

FILED Apr 15, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
	RD ST N ORTH ATER, FL 34620	US			
Current Mailing Address:			New Mailing Address:		
P.O. BOX CLEARW	7057 ATER, FL 34618	US			
FEI Number	r: 59-2190086 F	El Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	d Address of Curr	ent Registered Agent:	Name and Address of	New Registered Agent:	
15123 63F	DICEGLIE RD ST N ATER, FL 34620	US			
	e named entity subr e of Florida.	mits this statement for the	ourpose of changing its registered	office or registered agent, or both,	
SIGNATU	RE:				
	Electronic S	ignature of Registered Ag	ent	Date	
Election Ca	mpaign Financing Tru	st Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	P () Delete DINARDI, ANTHONY 588 HUNGRY HARBOR RD. NO. WOODMERE, NY 11581		Title: Name: Address: City-St-Zip:	( ) Change( ) Addition	
Title: Name: Address: City-St-Zip:	VP () Delete DICEGLIE, EARLINE 15123 63RD ST N CLEARWATER, FL 33760		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	T () Delete DINARD, JOYCE 588 HUNGRY HARBOR RD. NORTH WOODMERE, NY 11581		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	T () Delete DICEGLIE, NICOLA 374 12TH AVE. INDIAN ROCKS BEACH, FL 33785		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify 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: EARLINE DICEGLIE VP 04/15/2009