2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000002888

Entity Name: AQUA FINANCE, INC.

FILED Mar 25, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: ONE CORPORATE DR STE 300 WAUSAU, WI 54401 **Current Mailing Address: New Mailing Address:** PO BOX 844 WAUSAU, WI 54401 FEI Number: 39-1615890 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: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: () Delete Title: () Change () Addition BOURGUIGNON, CLAUDE F Name: Name: 5323 OLD STUMP ROAD Address: Address: City-St-Zip: GIG HARBOR, WA 98335 City-St-Zip: Title: PD Title: () Delete () Change () Addition CHADWELL, ROBERT D Name: Name: 1103 FLINT CREEK CIRCLE Address: Address: WAUSAU, WI 54401 City-St-Zip: City-St-Zip: Title: Title: D () Delete () Change () Addition NOEL, JOHN Name: Name: 3209 CHANNEL DRIVE Address: Address: City-St-Zip: STEVENS POINT, WI 54481 City-St-Zip: Title: () Delete Title: () Change () Addition MLADEK, ALEX Name: Name: Address: 9002 WINDEMERE PLACE Address: City-St-Zip: WESTON, WI 54476 City-St-Zip: Title: Title: () Delete () Change () Addition WEIRAUCH, ROBERT Name: Name: 304 ORIOLE LN Address: Address: City-St-Zip: WAUSAU, WI 54401 City-St-Zip: Title: () Delete Title: () Change () Addition TREIS, EDWARD F Name: Name: 31663 MUSCOVY ROAD Address: Address: City-St-Zip: City-St-Zip: CHENEQUA, WI 53029

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: ALEX MLADEK CFO 03/25/2008