

**FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00**

**FILED**  
**May 13 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
 Secretary of State  
 DIVISION OF CORPORATIONS

**DOCUMENT # F96000006744 (4)**  
 1. Corporation Name  
**AMERICAN WATER HEATER COMPANY**



DO NOT WRITE IN THIS SPACE

Principal Place of Business: **500 PRINCETON ROAD JOHNSON CITY TN 37601**  
 Mailing Address: **100 GALLERIA PKWY STE 900 ATLANTA GA 30339 US**

3. Date Incorporated or Qualified: **12/23/1996**  
 4. FEI Number: **34-0289600**  
 5. Certificate of Status Desired:  **\$8.75 Additional Fee Required**  
 6. Election Campaign Financing Trust Fund Contribution:  **\$5.00 May Be Added to Fees**  
 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

2. Principal Place of Business: Suite, Apt. #, etc., City & State, Zip, Country  
 2a. Mailing Address: Suite, Apt. #, etc., City & State, Zip, Country

9. Name and Address of Current Registered Agent  
**C T CORPORATION SYSTEM  
 1200 SOUTH PINE ISLAND ROAD  
 PLANTATION FL 33324**

10. Name and Address of New Registered Agent  
 81 Name  
 82 Street Address (P.O. Box Number is Not Acceptable)  
 83  
 84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		
TITLE	<b>PD</b>	<input type="checkbox"/> DELETE
NAME	<b>TRUDEAU, ROBERT W</b>	
STREET ADDRESS	<b>500 PRINCETON ROAD</b>	
CITY-ST-ZIP	<b>JOHNSON CITY TN</b>	
TITLE	<b>VTD</b>	<input type="checkbox"/> DELETE
NAME	<b>CARBONE, ANTHONY R</b>	
STREET ADDRESS	<b>500 PRINCETON ROAD</b>	
CITY-ST-ZIP	<b>JOHNSON CITY TN</b>	
TITLE	<b>S</b>	<input type="checkbox"/> DELETE
NAME	<b>HACKNEY, EDWARD T</b>	
STREET ADDRESS	<b>100 GALLERIA PKWY, STE 900</b>	
CITY-ST-ZIP	<b>ATLANTA GA</b>	
TITLE	<b>CD</b>	<input type="checkbox"/> DELETE
NAME	<b>HALL, GRAHAM H</b>	
STREET ADDRESS	<b>13 RACHAEL CLOSE</b>	
CITY-ST-ZIP	<b>SILVERWATER AUSTRALIA</b>	
TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>HAYES, GREG J</b>	
STREET ADDRESS	<b>100 GALLERIA PKWY, STE 900</b>	
CITY-ST-ZIP	<b>ATLANTA GA</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	<b>S.V</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

**(PLEASE SEE ATTACHMENT / ADDITIONS)**

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

*Benice Mow* *Benice Mow* *11/2/98* *(770) 857-8700*

CR2E034 (10/97)

**STATE OF FLORIDA**

**Profit Corporation Annual Report**

**AMERICAN WATER HEATER COMPANY - (Fed. ID #: 34-0299600)  
May, 1998**

**12. (cont'd) ADDITIONAL OFFICERS AND DIRECTORS LIST**

**NAME: Bernice Maw TITLE: Assistant Secretary**

**ADDRESS: 100 Galleria Parkway, Suite 900**

**CITY: Atlanta STATE: GA ZIP: 30339**

**NAME: Scott R. Phillips TITLE: Assistant Secretary**

**ADDRESS: 100 Galleria Parkway, Suite 900**

**CITY: Atlanta STATE: GA ZIP: 30339**