

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000006744

FILED
Apr 23, 2009
Secretary of State

Entity Name: AMERICAN WATER HEATER COMPANY

Current Principal Place of Business:

500 PRINCETON ROAD
JOHNSON CITY, TN 37601

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 245001
MILWAUKEE, WI 532249501 US

New Mailing Address:

ATTN: TAX DEPT.
P.O. BOX 245008
MILWAUKEE, WI 532249508 US

FEI Number: 34-0299600

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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:

Title: AT () Delete
Name: KITA, JOHN
Address: 11270 W. PARK PLACE
City-St-Zip: MILWAUKEE, WI 53224

Title: DVT () Delete
Name: MARTINEAU, PETER R
Address: 500 PRINCETON RD
City-St-Zip: JOHNSON CITY, TN 37601

Title: AT () Delete
Name: ACKERMAN, PATRICIA
Address: 11270 W. PARK PLACE
City-St-Zip: MILWAUKEE, WI 53224

Title: SD () Delete
Name: MACIOLEK, KENNETH
Address: 11270 W. PARK PLACE
City-St-Zip: MILWAUKEE, WI 53224

Title: DCP () Delete
Name: WHEALER, KEVIN J
Address: 500 PRINCETON RD
City-St-Zip: JOHNSON CITY, TN 37601

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: PATRICIA ACKERMAN

AT

04/23/2009

Electronic Signature of Signing Officer or Director

_____ Date