2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F98000005254

1. Entity Name

HEADWATERS RESOURCES, INC.

Principal Place of Business

10653 S RIVER FRONT PKWY

STE 300

SOUTH JORDAN, UT 84095

Mailing Address

10653 S RIVER FRONT PKWY

STE 300

DO NOT WRITE IN THIS SPACE

SOUTH JORDAN, UT 84095

FILED Jan 22, 2007 8:00 am Secretary of State

01-22-2007 90092 047 ***150.00

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01082007

No Chg-P

CR2E034 (11/05)

4, FEI Number 87-0619697 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

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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, 2007 Fee will be \$550.00 **9.** Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

10.		OFFICERS AND DIRECTORS		
	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO SORENSEN, SCOTT K 10653 S RIVER FRONT PKWY STE 3 SOUTH JORDAN, UT 84095	00	
	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GEHRMANN, WILLIAM H 10653 S RIVER FRONT PKWY STE 3 SOUTH JORDAN, UT 84095	000	
	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HATFIELD, HARLAN M 10653 S RIVER FRONT PKWY STE 3 SOUTH JORDAN, UT 84095	900	
	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BROWN, CURTIS J 10653 S RIVER FRONT PKWY STE 3 SOUTH JORDAN, UT 84095	900	
	TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS DAY, JASON T 10653 S RIVER FRONT PKWY STE 3 SOUTH JORDAN, UT 84095	300	
	TITLE NAME STREET ADDRESS CITY-ST-7IP			

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12. Thereby 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 impowered 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 addition, with all other like empowered.

SIGNATURE:

A WIRE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Brown , Secretary

U108/07 801-984-990