2007 FOR PROFIT CORPORATIO	ONFILEDApr 18, 2007 8:00 amSecretary of State
DOCUMENT # G52333 1. Entity Name HYDRO-THERM, INC.	Secretary of State 04-18-2007 90193 007 ***150.00
Principal Place of Business Mailing Address % WILLIAM H. GALLAGHER 123 MARINER DR. 123 MARINER DR. P.O . BOX 3270 ORMOND BEACH, FL 32170 ORMOND BEACH, FL 32176-2372	
	ACE 02132007 No Chg-P CR2E034 (11/05) 4. FEI Number Applied For 59-2329230 Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required Fee Required
6. Name and Address of Current Registered Agent GALLAGHER, WILLIAM H. 123 MARINER DR. ORMOND BEACH, FL- 32074 -32176	DO NOT WRITE IN THIS SPACE
the obligations of registered agent. SIGNATURE	Itered office or registered agent, or both, in the State of Florida. I am familiar with, and accept Itered Agent signature required when reinstating) DATE
FILE NOW!!! FEE IS \$150.00 9. Election Campaign Fi After May 1, 2007 Fee will be \$550.00 Trust Fund Contribute	
10. OFFICERS AND DIRECTORS TITLE DP NAME GALLAGHER, WILLIAM H STREET ADDRESS 123 MARINER DR. CITY-ST-ZIP ORMOND, FL 00000,	
TITLE DS NAME GALLAGHER, CAROL A. STREET ADDRESS 123 MARINER DR. CITY-ST-ZIP ORMOND, FL 000000,	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	IN THIS SPACE
TRILE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
indicated on this report or supplemental report is true and accurate and that my sig	exemptions contained in Chapter 119, Florida Statutes. I further certify that the information gnature shall have the same legal effect as if made under oath; that I am an officer or director quired by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if
SIGNATURE: Willia H. fully Cales. WILLAM H. C.	EALCA61492 4/15/07 886) 441-2299