2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

Secretary of State DOCUMENT # G82693 1. Entity Name 02-27-2006 90049 049 ***150.00 SOLAR WATER HEATERS OF HUDSON, INC. Principal Place of Business Mailing Address 18845 SAKERA ROAD HUDSON FL 34667 18845 SAKERA ROAD HUDSON FL 34667 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) City & State City & State 4. FEI Number Applied For 59-2370899 Not Applicable Zio Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name ELWINGER, EARL F. Street Address (P.O. Box Number is Not Acceptable) 360 TELFORD CT SPING HILL FL 34606 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, typed or printed name of registered again and tide if applicable (NOTE: Registered Agent eignature required when constating) FILE NOW!!! FEE IS \$150.00 \$5.00 May 8e 9. Election Campaign Financing - After May 1, 2006 Fee Will Be \$550.00 -Trust Fund Contribution. Make Check Psyable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. DILE PO ☐ Delete TIDE Change Addition NAME ELWINGER, EARL F. NAME STREET ADDRESS STREET ADDRESS 360 TELFORD CT CITY-ST-ZIP SPRING HILL FL CITY-ST-ZIP ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition MAL DAME STREET ADDRESS STREET ADORESS C)TY-57-77P CITY-ST-ZIP ☐ Deleta TITLE ☐ Change Addition TITLE NAME MANE STREET ADDRESS STREET ADDRESS CITY. ST. 719 CITY-ST-ZIP TITLE ☐ Deleta nn.e Change ☐ Addition MARKE STREET ADDRESS STREET ADDRESS CITY-\$1-71P CITY-51-712 Delete TITLE Addition NAME NAME STREET ADORESS STREET ADDRESS 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 it 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED

Feb 27, 2006 8:00 am

FLORIDA DEPARTMENT OF STATE Division of Corporations

February 14, 2006

SOLAR WATER HEATERS OF HUDSON, INC. 18845 SAKERA ROAD HUDSON, FL 34667 US

Subject: SOLAR WATER HEATERS OF HUDSON, INC.

Reference Number:

_ G82693

Please be advised, we have received your annual report/uniform business report; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

The fee to file the enclosed profit annual report/uniform business report is \$150.00. If a certificate of status is desired, please add an additional \$8.75.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/MH ANNUAL REPORTS SECTION