

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M88640

FILED  
Feb 02, 2006  
Secretary of State

**Entity Name:** LIFEGUARD PURIFICATION SYSTEMS, INC.

**Current Principal Place of Business:**

3907 W. DR. MARTIN LUTHER KING JR. BLVD.  
TAMPA, FL 33614 US

**New Principal Place of Business:**

**Current Mailing Address:**

4727 TROYDALE RD  
TAMPA, FL 33615 US

**New Mailing Address:**

FEI Number: 59-2895802

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WICKMAN, TERRY  
4727 TROYDALE RD  
TAMPA, FL 33615 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: P ( ) Delete  
Name: WICKMAN, TERRY,  
Address: 4727 TROYDALE RD  
City-St-Zip: TAMPA, FL

Title: D ( ) Delete  
Name: WICKMAN, GARY,  
Address: 876 WESTMINSTER DR.  
City-St-Zip: LANCASTER, PA

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 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: TERRY WICKMAN

PRS

02/02/2006

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date