

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000051165

FILED
Feb 26, 2006
Secretary of State

Entity Name: UNDERGROUND SOLUTIONS, INC.

Current Principal Place of Business:

620 E HAINES BLVD
LAKE ALFRED, FL 33

New Principal Place of Business:

620 E HAINES BLVD
LAKE ALFRED, FL 33850

Current Mailing Address:

4915 HWY 544 EAST
HAINES CITY, FL 33850

New Mailing Address:

620 E HAINES BLVD
LAKE ALFRED, FL 33850

FEI Number: 59-3652731

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMPSON, HASKELL J PST
620 E HAINES BLVD
LAKE ALFRED, FL 33850 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: PST () Delete
Name: THOMPSON, HASKEL J
Address: 4909 HWY 544 EAST
City-St-Zip: HAINES CITY, FL 33844

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: THOMPSON, HASKEL J
Address: 620 E HAINES BLVD
City-St-Zip: LAKE ALFRED, FL 33850

Title: V () Change (X) Addition
Name: LANE, ARICK D
Address: 129 FLORA DR
City-St-Zip: HAINES CITY, FL 33844

Title: V () Change (X) Addition
Name: VANMETER, STEVEN J
Address: 620 E HAINES BLVD
City-St-Zip: LAKE ALFRED, FL 33844

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: ARICK D. LANE

V

02/26/2006

Electronic Signature of Signing Officer or Director

Date