

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000082867

FILED  
Jan 06, 2005  
Secretary of State

Entity Name: FLORIDA FILTRATION PROPERTIES, INC.

## Current Principal Place of Business:

402 NORTH G STREET  
LAKE WORTH, FL 33460

## New Principal Place of Business:

## Current Mailing Address:

402 NORTH G STREET  
LAKE WORTH, FL 33460

## New Mailing Address:

FEI Number: 65-1140832

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BRAMS, DANIEL J ESQ  
1645 PALM BEACH LAKES BLVD SUITE 1050  
WEST PALM BEACH, FL 33401 US

## Name and Address of New Registered Agent:

HOWELL, CRAIG S ESQ  
402 NORTH G STREET  
LAKE WORTH, FL 33460 US

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: CRAIG HOWELL

01/06/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: HOWELL, CRAIG  
Address: 402 NORTH G STREET  
City-St-Zip: LAKE WORTH, FL 33460

Title: V ( ) Delete  
Name: JOHNSTON, IRVIN S  
Address: 402 NORTH G STREET  
City-St-Zip: LAKE WORTH, FL 33460

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VPD (X) Change ( ) Addition  
Name: JOHNSTON, IRVIN S  
Address: 402 NORTH G STREET  
City-St-Zip: LAKE WORTH, FL 33460

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CRAIG HOWELL

PD

01/06/2005

Electronic Signature of Signing Officer or Director

Date