

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000101011

Entity Name: FL. SLUDGE INC.

FILED  
Jun 08, 2006  
Secretary of State

## Current Principal Place of Business:

592 OLD DIXIE HIGHWAY  
VERO BEACH, FL 32962

## New Principal Place of Business:

## Current Mailing Address:

592 OLD DIXIE HIGHWAY  
VERO BEACH, FL 32962

## New Mailing Address:

FEI Number: 59-1613127

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JAHOLKOWSKI, MIKE  
596 OLD DIXIE HIGHWAY  
VERO BEACH, FL 32962 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CPS ( ) Delete  
Name: JAHOLKOWSKI, MIKE  
Address: 592 OLD DIXIE HIGHWAY  
City-St-Zip: VERO BEACH, FL 32962

Title: D ( ) Delete  
Name: JAHOLKOWSKI, MIKE  
Address: 592 OLD DIXIE HIGHWAY  
City-St-Zip: VERO BEACH, FL 32962

Title: VD (X) Delete  
Name: JAHOLKOWSKI, MARICIA  
Address: 592 OLD DIXIE HIGHWAY  
City-St-Zip: VERO BEACH, FL 32962

Title: TD ( ) Delete  
Name: JAHOLKOWSKI, PATRICIA  
Address: 592 OLD DIXIE HWY  
City-St-Zip: VERO BEACH, FL 32962

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: VTD (X) Change ( ) Addition  
Name: JAHOLKOWSKI, PATRICIA  
Address: 592 OLD DIXIE HWY  
City-St-Zip: VERO BEACH, FL 32962

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: PATRICIA JAHOLKOWSKI

V

06/08/2006

Electronic Signature of Signing Officer or Director

Date