

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000019464

FILED
Apr 08, 2009
Secretary of State

Entity Name: FLORIDA CRYSTAL WELL AND SPRINKLER, INC.

Current Principal Place of Business:

4873 NW PALM COAST PKWY, SUITE 5
PALM COAST, FL 32137

New Principal Place of Business:

83 BELVEDERE LN
PALM COAST, FL 32137

Current Mailing Address:

P.O. BOX 353224
PALM COAST, FL 32135

New Mailing Address:

FEI Number: 04-3609079

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBERGE, MONICA
36 BRESSLER LN
PALM COAST, FL 32137 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: D () Delete
Name: ROBERGE, MONICA
Address: 36 BRESSLER LN
City-St-Zip: PALM COAST, FL 32137

Title: P () Delete
Name: ROBERGE, STEPHEN
Address: 36 BRESSLER LANE
City-St-Zip: PALM COAST, FL 32137

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change () Addition
Name: ROBERGE, STEPHEN
Address: 83 BELVEDERE LN
City-St-Zip: PALM COAST, FL 32137

I hereby certify that the information supplied with this filing does not qualify 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: MONICA ROBERGE

D

04/08/2009

Electronic Signature of Signing Officer or Director

Date