## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000066126

Entity Name: MIKE MIZELL WATER WELLS. INC

FILED Apr 20, 2006 Secretary of State

| Littley Iva                                   | IIIC. WIIIAL WIIZ                                   | LLLE VVATER VVLLEO, INO.       |  |  |  |
|---|---|--------------------------------|--|--|--|
| Current Principal Place of Business:          |   |                                | New Principal Place of Business:                                   |  |  |
|   | DGES ROAD<br>N, FL 32011                            |                                |  |  |  |
| Current Mailing Address:                      |   |                                | New Mailing Address:   |  |  |
|   | DGES ROAD<br>N, FL 32011                            |                                |  |  |  |
| FEI Number: 02-0632009 FEI Number App         |   | FEI Number Applied For ( )     | FEI Number Not Applicable ( )                                      | Certificate of Status Desired ( )            |  |
| Name and Address of Current Registered Agent: |   |                                | Name and Address of New Registered Agent:                          |  |  |
| 45298 HO                                      | MICHAEL D<br>DGES RD<br>.N, FL 32011                | US                             |  |  |  |
|   | e named entity<br>e of Florida.                     | submits this statement for the | purpose of changing its registere                                  | d office or registered agent, or both,       |  |
| SIGNATU                                       | RE:   |                                |  |  |  |
|   | Electro   | nic Signature of Registered Ag | ent  | Date   |  |
| Election Ca                                   | mpaign Financin                                     | g Trust Fund Contribution ( ). |  |  |  |
| OFFICERS AND DIRECTORS:                       |   |                                | ADDITIONS/CHANG  | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | PD (<br>MIZELL, MICH<br>45298 HODGE<br>CALLAHAN, FL | SRD                            | Title:<br>Name:<br>Address:<br>City-St-Zip:                        | ( ) Change ( ) Addition                      |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | (   | ) Delete                       | Title: S Name: MIZELL, JU Address: 45277 HOD City-St-Zip: CALLAHAN |  |  |

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: MICHAEL D. MIZELL P 04/20/2006