

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000071086

FILED
Apr 30, 2007
Secretary of State

Entity Name: USAVE ENERGY SERVICES, INC

Current Principal Place of Business:

P.O. BOX 15509
CLEARWATER, FL 33766

New Principal Place of Business:

2455 MCMULLEN BOOTH RD
CLEARWATER, FL 33766

Current Mailing Address:

P.O. BOX 15509
CLEARWATER, FL 33766

New Mailing Address:

FEI Number: 03-0469725

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OWENS, CHARLES S III
P.O. BOX 15509
CLEARWATER, FL 33766 US

Name and Address of New Registered Agent:

OWENS, CHARLES S III
2455 MCMULLEN BOOTH RD
CLEARWATER, FL 33766 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:

04/30/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: OWENS, CHARLES S III
Address: P.O. BOX 15509
City-St-Zip: CLEARWATER, FL 33766

Title: D () Delete
Name: OWENS, KATHLEEN M
Address: P.O. BOX 15509
City-St-Zip: CLEARWATER, FL 33766

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: CHARLES S. OWENS III

D

04/30/2007

Electronic Signature of Signing Officer or Director

Date