
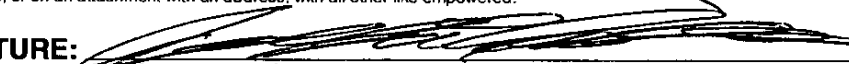


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90538 038 ***150.00

DOCUMENT # P03000050771 1. Entity Name SOUTH FLORIDA WATER SERVICES, INC.																																																																																																																																																					
Principal Place of Business 3577 CONROY ROAD 312 ORLANDO, FL 32839			Mailing Address 3577 CONROY ROAD 312 ORLANDO, FL 32839																																																																																																																																																		
2. Principal Place of Business 2700 Cove Cay Drive		3. Mailing Address 2700 Cove Cay Drive																																																																																																																																																			
Suite, Apt. #, etc. Apt #4B		Suite, Apt. #, etc. Apt #4B																																																																																																																																																			
City & State Clearwater, FL		City & State Clearwater, FL																																																																																																																																																			
Zip 33760	Country USA	Zip 33760	Country USA	4. FEI Number 06-1691448																																																																																																																																																	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable																																																																																																																																																	
6. Name and Address of Current Registered Agent SIEBENTHAL, JOSHUA L 3577 CONROY ROAD 312 ORLANDO, FL 32839				7. Name and Address of New Registered Agent Name Siebenthal, Joshua L Street Address (P.O. Box Number is Not Acceptable) 2700 Cove Cay Dr Apt# 4B City Clearwater FL Zip Code 33760																																																																																																																																																	
8. 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. I am familiar with, and accept the obligations of registered agent.																																																																																																																																																					
SIGNATURE  04-28-05 <small>(NOTE: Registered Agent signature required when reappointing)</small>																																																																																																																																																					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees																																																																																																																																																			
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left; padding: 2px;">10. OFFICERS AND DIRECTORS</th> <th colspan="3" style="text-align: left; padding: 2px;">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</th> </tr> <tr> <td style="width: 15%; padding: 2px;">TITLE</td> <td style="width: 65%; padding: 2px;"> D SIEBENTHAL, JOSHUA L <input type="checkbox"/> Delete </td> <td style="width: 20%; padding: 2px;"></td> <td style="width: 15%; padding: 2px;">TITLE</td> <td style="width: 65%; padding: 2px;"> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2700 Cove Cay Drive Apt #4B Clearwater, FL 33760 </td> <td style="width: 20%; padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">STREET ADDRESS</td> <td style="padding: 2px;">3577 CONROY ROAD, #312</td> <td></td> <td style="padding: 2px;">STREET ADDRESS</td> <td style="padding: 2px;"></td> <td></td> </tr> <tr> <td style="padding: 2px;">CITY-ST-ZIP</td> <td style="padding: 2px;">ORLANDO, FL 32839</td> <td></td> <td style="padding: 2px;">CITY-ST-ZIP</td> <td style="padding: 2px;"></td> <td></td> </tr> <tr><td colspan="6" style="height: 10px;"></td></tr> <tr> <td style="padding: 2px;">TITLE</td> <td style="padding: 2px;"></td> <td></td> <td style="padding: 2px;">TITLE</td> <td style="padding: 2px;"></td> <td></td> </tr> <tr> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;"></td> <td></td> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;"></td> <td></td> </tr> <tr> <td style="padding: 2px;">STREET ADDRESS</td> <td style="padding: 2px;"></td> <td></td> <td style="padding: 2px;">STREET ADDRESS</td> <td style="padding: 2px;"></td> <td></td> </tr> <tr> <td style="padding: 2px;">CITY-ST-ZIP</td> <td style="padding: 2px;"></td> <td></td> <td style="padding: 2px;">CITY-ST-ZIP</td> <td style="padding: 2px;"></td> <td></td> </tr> <tr><td colspan="6" style="height: 10px;"></td></tr> <tr> <td style="padding: 2px;">TITLE</td> <td style="padding: 2px;"></td> <td></td> <td style="padding: 2px;">TITLE</td> <td style="padding: 2px;"></td> <td></td> </tr> <tr> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;"></td> <td></td> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;"></td> <td></td> </tr> <tr> <td style="padding: 2px;">STREET ADDRESS</td> <td style="padding: 2px;"></td> <td></td> <td style="padding: 2px;">STREET ADDRESS</td> <td style="padding: 2px;"></td> <td></td> </tr> <tr> <td style="padding: 2px;">CITY-ST-ZIP</td> <td style="padding: 2px;"></td> <td></td> <td style="padding: 2px;">CITY-ST-ZIP</td> <td style="padding: 2px;"></td> <td></td> </tr> <tr><td colspan="6" style="height: 10px;"></td></tr> <tr> <td style="padding: 2px;">TITLE</td> <td style="padding: 2px;"></td> <td></td> <td style="padding: 2px;">TITLE</td> <td style="padding: 2px;"></td> <td></td> </tr> <tr> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;"></td> <td></td> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;"></td> <td></td> </tr> <tr> <td style="padding: 2px;">STREET ADDRESS</td> <td style="padding: 2px;"></td> <td></td> <td style="padding: 2px;">STREET ADDRESS</td> <td style="padding: 2px;"></td> <td></td> </tr> <tr> <td style="padding: 2px;">CITY-ST-ZIP</td> <td style="padding: 2px;"></td> <td></td> <td style="padding: 2px;">CITY-ST-ZIP</td> <td style="padding: 2px;"></td> <td></td> </tr> <tr><td colspan="6" style="height: 10px;"></td></tr> <tr> <td style="padding: 2px;">TITLE</td> <td style="padding: 2px;"></td> <td></td> <td style="padding: 2px;">TITLE</td> <td style="padding: 2px;"></td> <td></td> </tr> <tr> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;"></td> <td></td> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;"></td> <td></td> </tr> <tr> <td style="padding: 2px;">STREET ADDRESS</td> <td style="padding: 2px;"></td> <td></td> <td style="padding: 2px;">STREET ADDRESS</td> <td style="padding: 2px;"></td> <td></td> </tr> <tr> <td style="padding: 2px;">CITY-ST-ZIP</td> <td style="padding: 2px;"></td> <td></td> <td style="padding: 2px;">CITY-ST-ZIP</td> <td style="padding: 2px;"></td> <td></td> </tr> </table>						10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			TITLE	D SIEBENTHAL, JOSHUA L <input type="checkbox"/> Delete		TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2700 Cove Cay Drive Apt #4B Clearwater, FL 33760		STREET ADDRESS	3577 CONROY ROAD, #312		STREET ADDRESS			CITY-ST-ZIP	ORLANDO, FL 32839		CITY-ST-ZIP									TITLE			TITLE			NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP									TITLE			TITLE			NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP									TITLE			TITLE			NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP									TITLE			TITLE			NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																																																																																																																																																					
SIGNATURE:  04-28-05 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>																																																																																																																																																					

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04282005 Chg-P CR2E034 (10/03)