

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000083077

FILED
Jan 09, 2007
Secretary of State

Entity Name: WATERSIDE ELECTRICAL TECHNOLOGIES, INC.

Current Principal Place of Business:

1800 OLD MOODY BLVD
SUITE 1
BUNNELL, FL 32110

New Principal Place of Business:

Current Mailing Address:

PO BOX 2413
BUNNELL, FL 32110

New Mailing Address:

FEI Number: 55-0842472

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALL, CHRISTOPHER
19 RIPCORN LANE
PALM COAST, FL 32164 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: P () Delete
Name: HALL, CHRISTOPHER
Address: 19 RIPCORN LANE
City-St-Zip: PALM COAST, FL 32164

Title: V () Delete
Name: HALL, CAYMI
Address: 19 RIPCORN LANE
City-St-Zip: PALM COAST, FL 32164

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HALL, CHRISTOPHER
Address: POST OFFICE BOX 2413
City-St-Zip: BUNNELL, FL 32110

Title: V (X) Change () Addition
Name: HALL, CAYMI
Address: POST OFFICE BOX 2413
City-St-Zip: BUNNELL, FL 32110

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: CHRISTOPHER HALL

P

01/09/2007

Electronic Signature of Signing Officer or Director

Date