## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 30, 2007 8:00 am Secretary of State **DOCUMENT # P03000122961** 04-30-2007 90856 010 \*\*\*150.00 BUTLER SOLAR CONTROL CORP. 40093967 Principal Place of Business Mailing Address 9221 SAN CARLOS BLVD 9221 SAN CARLOS BLVD. FORT MYERS, FL 33912 FORT MYERS, FL 33912 2. Principal Place of Business - No P.O. Box # 3. Mailing Address GOID JONATHANS BAY CIRCLE GOID JONATHANS BAY CIRCLE Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (12/06) 04262007 Chg-P # 601 City & State City & State 4. FEI Number Applied For FT MYERS FL FT MYERS 20-0355931 Not Applicable Country Zip **3**3908 Country \$8.75 Additional 5. Certificate of Status Desired 33908 105 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent HAZLETT DAWN HAZLETT, DAWN L 9221, SAN CARLOS BLVD. Street Address (P.O. Box Number is Not Acceptable) FORT MYERS, FL 33912 JONATHANS BAY CIRCLE City FORT MYERS Zip Code 33908 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. 4-26-07 SIGNATURE. (NOTE: Registered Agen) signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Change Addition HAZLETT , GLENN H. NAME HAZLETT, GLENN H NAME GOIO JONATHANS BAY CIRCLE #601 9221 SAN CARLOS BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FORT MYERS, FL 33912 COY-ST-78 FORT MYERS , FL- 33908 TITLE ☐ Delete HILE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delele TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-7IP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Citanne ■ Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filting does not qualify for the exemptions contained 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 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.

Solem H. Haytti

SIGNATURE:

FILED