


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2007 08:00 AM
Secretary of State

DOCUMENT # P03000134417

1. Entity Name
 PSI WATER CONTROL, INC.



Principal Place of Business
 34 KANTAGREE TRAIL
 OSTEEN, FL 32764

Mailing Address
 POST OFFICE BOX 950591
 LAKE MARY, FL 32795

DO NOT WRITE IN THIS SPACE



02242007 No Chg-P CR2E034 (11/05)

4. FEI Number
 56-2420126

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

PARIGIAN, ROBERT J
 34 KANTAGREE TRAIL
 OSTEEN, FL 32764

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	PARIGIAN, ROBERT J
STREET ADDRESS	34 KANTAGREE TRAIL
CITY-ST-ZIP	OSTEEN, FL 32764
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000664712
 03/22/07-80056-019 150.00

U00000660199
 03/16/07-80029-029 150.00

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12. I hereby certify that the information supplied with this filing 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.

SIGNATURE: _____ **2-25-07** **407-323-1260**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #