SIGNATURE:

## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED** Apr 24, 2006 08:00 AN Secretary of State

DOCUMENT # P04000125643  1. Entity Name W.E.D. WATER SYSTEM REPAIR, INC.							
Principal Place 11226 LAKEN NEW PORT RI	/IEW DRIVE	nailing address 11226 LAKEVIEW DRIVE NEW PORT RICHEY, FL 34654	ļ.				
				04182006	No Chg-P	CR2E034 (11	
DO NOT WRITE IN THIS SPACE			GE.	4. FEI Number 04-380			Applied For Not Applicable
1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1				5. Certificate	of Status Desired	□ \$8.75 Fee Ro	Additional quired
6. Name and Address of Current Registered Agent  DOUGLAS, WILBUR E JR.  11226 LAKEVIEW DRIVE  NEW PORT RICHEY, FL 34654				E1104014	NOT W HIS SP	131.00	
5. 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 Signature, typed or printed name of registered agent and this it applicable. (NOTE: Registered Agent				d when reinstaling)		DATE	
FILE NOW!!! FEE IS \$150.00  After May 1, 2006 Fee will be \$550.00  9. Election Campaign Final Trust Fund Contribution.				.00 May Be led to Fees			
10.	OFFICERS AND DIR	CTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DOUGLAS, WILBUR E JR. 11226 LAKEVIEW DRIVE NEW PORT RICHEY, FL 34654						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DOUGLAS, ANITA L 11226 LAKEVIEW DRIVE NEW PORT RICHEY, FL 34654						
TITLE HAME STREET ADDRESS CITY-ST-ZIP				ĐΟ	NOT W	RITE	
ITTLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SF	ACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP		· ·					
12. I hereby certify that the Information supplied with this filling 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 offect 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.							