


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2006 8:00 am
Secretary of State

02-02-2006 90034 003 ***150.00

DOCUMENT # P04000149444

1. Entity Name
BACKFLOW DIVISION OF SYSTEMS GROUP, INC.



Principal Place of Business
**7307 9TH AVENUE NORTHWEST
 BRADENTON, FL 34209**

Mailing Address
**4803 34TH STREET WEST
 BRADENTON, FL 34210**

2. Principal Place of Business
4803 34th Street W
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State
Bradenton, FL

City & State
 City & State

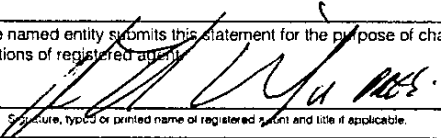
Zip
34210

Country
Manatee

6. Name and Address of Current Registered Agent
**BRIEGEL & UTRERA, P.A.
 1840 SW 82ND ST.
 4TH FLOOR
 MIAMI, FL 33146**

7. Name and Address of New Registered Agent
 Name
Robert H Richey
 Street Address (P.O. Box Number is Not Acceptable)
4803 34th Street West
 City
Bradenton FL Zip Code
34210

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:  **Robert H Richey, President** 1-28-06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RICHEY, ROBERT H 7307 9TH AVENUE NORTHWEST BRADENTON, FL 34209 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	XXXXXXXXXXXXXXXXXXXX <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	XXXXXXXXXXXXXXXXXXXX <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTS <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4803 34th Street West Bradenton, FL 34210
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Karolee A Gmeinder 6916 Conestoga Place University Pk, FL 34201
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:  **Robert H Richey, President** 1-28-06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #



01292006 Chg-P CR2E034 (11/05)

4. FEI Number
56-2487913 Applied For Not Applicable

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