

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000009215

FILED
Mar 31, 2009
Secretary of State

Entity Name: PCI STORM WATER SOLUTIONS INC.

Current Principal Place of Business:

2176 NE 63RD STREET
FT LAUDERDALE, FL 33308

New Principal Place of Business:

2765 SW 36TH STREET
FT LAUDERDALE, FL 33312

Current Mailing Address:

1007 N FEDERAL HIGHWAY
SUITE 267
FT LAUDERDALE, FL 33304

New Mailing Address:

FEI Number: 20-8267291 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CAMPBELL, CHRISTOPHER P
2176 NE 63RD STREET
FT LAUDERDALE, FL 33308 US

Name and Address of New Registered Agent:

CAMPBELL, CHRISTOPHER P
1007 N FEDERAL HIGHWAY
267
FT LAUDERDALE, FL 33304 US

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

03/31/2009

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CAMPBELL, CHRISTOPHER P
Address: 1007 N FEDERAL HIGHWAY, SUITE 267
City-St-Zip: FT LAUDERDALE, FL 33304

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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 CAMPBELL

PRES

03/31/2009

Electronic Signature of Signing Officer or Director

Date