

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000019838

**FILED**  
**Apr 19, 2012**  
**Secretary of State**

**Entity Name:** DRAINAGE SOLUTIONS, INC.

**Current Principal Place of Business:**

1573 ABER ROAD  
ORLANDO, FL 32807

**New Principal Place of Business:**

1573 ABER ROAD  
ORLANDO, FL 32807 UN

**Current Mailing Address:**

1573 ABER ROAD  
ORLANDO, FL 32807

**New Mailing Address:**

1573 ABER ROAD  
ORLANDO, FL 32807 UN

**FEI Number:** 27-2057172

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

**Name and Address of New Registered Agent:**

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** CHILLEMI, KENNETH  
**Address:** 1573 ABER ROAD  
**City-St-Zip:** ORLANDO, FL 32807

**Title:** D  
**Name:** HAFF, GEORGE  
**Address:** 1573 ABER ROAD  
**City-St-Zip:** ORLANDO, FL 32807 UN

**Title:** TREA  
**Name:** CERVASIO, MARIANNE  
**Address:** 1573 ABER ROAD  
**City-St-Zip:** ORLANDO, FL 32807

I hereby 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 all other like empowered.

**SIGNATURE:** MARIANNE CERVASIO

TREA

04/19/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date