2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 21, 2007 8:00 am
Secretary of State
04-27-2007 90193 034 ***150.00

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DOCUMENT # P96000069854

1. Entity Name
ANSER THERMAL TECHNOLOGIES, INC.

Principal Place of Business	Mailing Address
5000 SW 25 BLVD, # 1113 GAINESVILLE, FL 32608	C/O MC THURBER 5000 SW 25 BLVD, # 1113 GAINESVILLE, FL 32608

66015917

04242007 No Chg-P CR2E034 (11/05)

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4. FEI Number
65-1004264
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

FOGT, THOMAS A ESQ.
700 COLORADO AVENUE
STUART, FL 34994

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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 agents.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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	VPTD
NAME	PUETT, EDWIN JR
STREET ADDRESS	38 EAST HIGH POINT RD
CITY-ST-ZIP	STUART, FL 34994
TITLE	OP
NAME	THURBER, MARY C
STREET ADDRESS	5000 SW 25TH BV, # 1113
CITY-ST-ZIP	GAINESVILLE, FL 32608
TITLE	D
NAME	DIPPY, WALTER
STREET ADDRESS	509 SE RIVERSIDE DR
CITY-ST-ZIP	STUART, FL 34994
TITLE	D
NAME	HOOVER, RON
STREET ADDRESS	509 SE RIVERSIDE DR
CITY-ST-ZIP	STUART, FL 34994
TITLE	DS
NAME	WARD, KATHY
STREET ADDRESS	4849 CASH ROAD
CITY-ST-ZIP	FLOWERY BRANCH, GA 30542
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: Mary C. Thurber, President 18 May 2007 352-373-0662
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #