

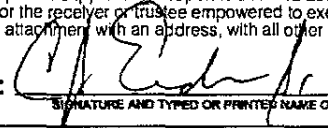


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # P96000097747 1. Entry Name SWF UTILITY METERING, INC.			
Principal Place of Business P O BOX 2701 BONITA SPRINGS, FL 34133-2701		Mailing Address P O BOX 2701 BONITA SPRINGS, FL 34133-2701	
			
		04262006 No Chg-P CR2E034 (11/05)	
		4. FEI Number 59-3409733	
		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ERDMAN, GREGORY A 3645 BONITA BEACH RD STE 3 BONITA SPRINGS, FL 34134			
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 _____ (NOTE: Registered Agent signature required when reinstating) <small>Signature, typed or printed name of registered agent and title if applicable. DATE</small>			
FILE NOW!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE	D	U00000553603 05/15/06-80058-004 158.75	
NAME	ERDMAN, CHARLES J JR		
STREET ADDRESS	27008 OAKWOOD LAKE DR		
CITY-ST- ZIP	BONITA SPRINGS, FL 34134		
TITLE	D		
NAME	ERDMAN, GREGORY A		
STREET ADDRESS	3575 BONITA BEACH RD		
CITY-ST- ZIP	BONITA SPRINGS, FL 34134		
TITLE			
NAME			
STREET ADDRESS			
CITY-ST- ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY-ST- ZIP			
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: 		Charles J Erdman Jr 4/27/06 239-992-8833	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>	