

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000069307

FILED  
Apr 27, 2006  
Secretary of State

Entity Name: HYDROSPACE ENGINEERING, INC.

## Current Principal Place of Business:

6920 CYPRESS LAKE CT  
SAINT AUGUSTINE, FL 32086

## New Principal Place of Business:

## Current Mailing Address:

6920 CYPRESS LAKE CT  
SAINT AUGUSTINE, FL 32086

## New Mailing Address:

FEI Number: 59-3533063

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MOSER, C N  
2542 SW 14TH DR.  
GAINESVILLE, FL 32608 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: MELTON, AUBREY E III  
Address: 6920 CYPRESS LAKE CT  
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: VD ( ) Delete  
Name: FOWLER, PHILIP A PH  
Address: 312 3RD ST  
City-St-Zip: MERRITT ISLAND, FL 32953

Title: STD ( ) Delete  
Name: MELTON, BECKI D  
Address: 6920 CYPRESS LAKE CT  
City-St-Zip: SAINT AUGUSTINE, FL 32086

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change ( ) Addition  
Name: FOWLER, PHILLIP A PHD  
Address: 310 3RD ST  
City-St-Zip: MERRITT ISLAND, FL 32953

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

I hereby certify that the information supplied with this filing does not qualify for the 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: AUBREY E. MELTON III

PD

04/27/2006

Electronic Signature of Signing Officer or Director

Date