

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H02677

**Entity Name:** H2O BACKFLO, INC.

**Current Principal Place of Business:**

599 W. RIVER RD.  
PALATKA, FL 32177

**Current Mailing Address:**

P.O. BOX 8  
GREEN COVE SPRINGS, FL 32043

**FEI Number:** 59-2406517

**Certificate of Status Desired:** No

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

STOKELY, BERNICE A  
599 W. RIVER RD.  
PALATKA, FL 32177 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

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title	DP	Title	ST
Name	STOKELY, EDWARD G.	Name	STOKELY, BERNICE A.
Address	599 W. RIVER RD.	Address	599 W. RIVER RD.
City-State-Zip:	PALATKA FL 32177	City-State-Zip:	PALATKA FL 32177

*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:** EDWARD G STOKELY

**PRESIDENT**

**04/27/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date