2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003843

FILED May 02, 2007 Secretary of State

Entity Name: WATER FOR THE NATIONS, INC. **Current Principal Place of Business: New Principal Place of Business:** 5897 SARATOGA DR CRESTVIEW, FL 32536 **Current Mailing Address: New Mailing Address:** 5897 SARATOGA DR CRESTVIEW, FL 32536 FEI Number: 59-3654955 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HINESLEY, JACK RANDY 5897 SARÁTOGA DR CRESTVIEW, FL 32536 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete HINESLEY, JACK RANDY HINESLEY, JACK R Name: Name: 5897 SARATOGA DR Address: 5897 SARATOGA DR Address: CRESTVIEW, FL 32536 City-St-Zip: City-St-Zip: CRESTVIEW, FL 32536 Title: VD () Delete Title: () Change () Addition HINESLEY, VICKI Name: Name: Address: 5897 SARATOGA DR Address: City-St-Zip: CRESTVIEW, FL 32536 City-St-Zip: Title: () Delete Title: () Change () Addition EVANS, MAURICE E Name: Name: Address: 347 CANTEBURY CIRCLE Address: City-St-Zip: FORT WALTON BEACH, FL 32548 City-St-Zip: Title: TD () Delete Title: () Change () Addition Name: BRANDES, JAY H Name: Address: 661 FAIRWAY AVENUE Address: City-St-Zip: FORT WALTON BEACH, FL 32547 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JACK R HINESLEY PD 05/02/2007