

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01000002432

FILED
Apr 24, 2002 8:00 AM
Secretary of State

Entity Name: INWATER RESEARCH GROUP, INC.

Current Principal Place of Business:

4160 HYLINE DRIVE
JENSEN BEACH, FL 34957

New Principal Place of Business:

Current Mailing Address:

4160 HYLINE DRIVE
JENSEN BEACH, FL 34957

New Mailing Address:

FEI Number: 65-1090322 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRESETTE, MICHAEL J
4160 HYLINE DRIVE
JENSEN BEACH, FL 34957 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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PEERY, BRUCE D
Address: 4160 HYLINE DRIVE
City-St-Zip: JENSEN BEACH, FL 34957

Title: D () Delete
Name: BRESETTE, MICHAEL J
Address: 4160 HYLINE DRIVE
City-St-Zip: JENSEN BEACH, FL 34957

Title: D () Delete
Name: GORHAM, JONATHAN C
Address: 5502 SEAGRAPE DR
City-St-Zip: FT PIERCE, FL 34982

Title: D () Delete
Name: HERREN, RICHARD M
Address: 1105 S OCEAN DR
City-St-Zip: FT PIERCE, FL 34949

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PEERY, BRUCE D
Address: 4104 LOOKOUT COURT
City-St-Zip: FT PIERCE, FL 34951

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

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

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 Section 119.07(3)(i), 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: BRUCE D. PEERY

PRES

04/24/2002

Electronic Signature of Signing Officer or Director

_____ Date