


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2004 08:00 AM
Secretary of State

DOCUMENT # P02000014909

1. Entity Name
WATER REFINING CO.



Principal Place of Business 7091-A PINNACLE DRIVE FT MYERS, FL 33907	Mailing Address 7091-A PINNACLE DRIVE FT MYERS, FL 33907
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DO NOT WRITE IN THIS SPACE



01072004 No Chg-P CR2E034 (10/03)

4. FEI Number 03-0448749	Applied For Not Applicable
5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WILLIAMS, DONALD P
405 S.E. 30TH TERRACE
CAPE CORAL, FL 33904

DO NOT WRITE IN THIS SPACE

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

U00000061002
 02/23/04-80061-009 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BIGGERMAN, GREGORY 4071 PRAIRIE VIEW DR NO SARASOTA, FL 34236
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT SPRINGSTON, CINDY 4085 E ALLENDALE ST INVERNESS, FL 34453
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS WILLIAMS, DONALD P 405 S.E. 30TH TERR CAPE CORAL, FL 33904
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Donald P. Williams*
 DONALD P. WILLIAMS

2-18-04 (239) 936-3435