

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 201005

Entity Name: WALDOT CORP.

FILED
Apr 14, 2009
Secretary of State

Current Principal Place of Business:

20 HOPSON RD
JACKSONVILLE, FL 32250

New Principal Place of Business:

20 HOPSON RD
JACKSONVILLE BEACH, FL 32250

Current Mailing Address:

20 HOPSON RD
JACKSONVILLE, FL 32250

New Mailing Address:

20 HOPSON RD
JACKSONVILLE BEACH, FL 32250 US

FEI Number: 59-0790087

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOFTIN, WILLIAM A., JR.
20 HOPSON RD.
JACKSONVILLE BCH, FL 32250 US

Name and Address of New Registered Agent:

LOFTIN, WILLIAM A., JR.
20 HOPSON RD.
JACKSONVILLE BEACH, FL 32250 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:

04/14/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LOFTIN JR, WILLIAM A
Address: 20 HOPSON RD
City-St-Zip: JACKSONVILLE BCH, FL

Title: V () Delete
Name: LOFTIN, DOROTHY T
Address: 20 HOPSON RD
City-St-Zip: JACKSONVILLE BCH, FL

Title: T () Delete
Name: LOFTIN JR, WILLIAM A.
Address: 20 HOPSON RD
City-St-Zip: JACKSONVILLE BCH, FL

Title: S () Delete
Name: LOFTIN, DOROTHY T.
Address: 20 HOPSON RD.
City-St-Zip: JACKSONVILLE BCH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LOFTIN JR, WILLIAM A
Address: 20 HOPSON RD
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

Title: V (X) Change () Addition
Name: LOFTIN, DOROTHY T
Address: 20 HOPSON RD
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

Title: T (X) Change () Addition
Name: LOFTIN JR, WILLIAM A.
Address: 20 HOPSON RD
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

Title: S (X) Change () Addition
Name: LOFTIN, DOROTHY T.
Address: 20 HOPSON RD.
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM A LOFTIN JR

P

04/14/2009

Electronic Signature of Signing Officer or Director

Date