2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000002084

FILED Jan 21, 2009 Secretary of State

Entity Name: WATEREUSE FOUNDATION CORPORATION Current Principal Place of Business: New Principal Place of Business: 1199 NORTH FAIRFAX STREET, SUITE 410 ALEXANDRIA, VA 22314 **Current Mailing Address: New Mailing Address:** 1199 NORTH FAIRFAX STREET, SUITE 410 ALEXANDRIA, VA 22314 FEI Number: 68-0309391 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SHEARER, JOHN 1917 WINGFIELD DRIVE LONGWOOD, FL 32779 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: () Delete (X) Change () Addition YOUNG, RON MOORE, DAVID L Name: Name: Address: 31315 CHANEY STREET Address: 2379 BROAD STREET City-St-Zip: LAKE ELSINORE, CA 92530 City-St-Zip: BROOKSVILLE, FL 34604 Title: () Delete Title: (X) Change () Addition Name: MOORE, DAVID L Name: JACANGELO, JOE Address: 2379 BROAD STREET Address: 40814 STONEBURNER MILL LANE City-St-Zip: BROOKSVILLE, FL 34604 City-St-Zip: LOVETTSVILLE, VA 20180 22 Title: () Delete Title: () Change () Addition MINWEGEN, THOMAS A Name: Name: 1001 SOUTH VALLEY VIEW BOULEVARD Address: Address: City-St-Zip: LAS VEGAS, NV 89153 City-St-Zip: Title: ED () Delete Title: () Change () Addition Name: MILLER, G. WADE Name: 1199 NORTH FAIRFAX STREET, SUITE 410 Address: Address: City-St-Zip: ALEXANDRIA, VA 22314 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: G. WADE MILLER ED 01/21/2009