

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000002484

FILED  
Apr 20, 2009  
Secretary of State

Entity Name: CLEARWATER LOADERS, INC.

**Current Principal Place of Business:**

11150 SOUTH WILCREST DRIVE  
HOUSTON, TX 77099

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 720986  
HOUSTON, TX 77272

**New Mailing Address:**

FEI Number: 74-1879062      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: BURDEN, SHANE  
Address: 7607 STONE ARBOR  
City-St-Zip: SUGAR LAND, TX 77479

Title: VP ( ) Delete  
Name: MUNDY, DAVID  
Address: 2702 HIGHLAND CT.  
City-St-Zip: SUGAR LAND, TX 77478

Title: SD ( ) Delete  
Name: RAMSEY, BEN  
Address: 10002 BALMFORTH  
City-St-Zip: HOUSTON, TX 77096

Title: T ( ) Delete  
Name: BURDEN, SHANE  
Address: 7607 STONE ARBOR  
City-St-Zip: SUGAR LAND, TX 77479

Title: D ( ) Delete  
Name: BUSCH, KEN  
Address: 7480 BEECHNUT, #337  
City-St-Zip: HOUSTON, TX 77074

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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 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: D. SHANE BURDEN

PRES

04/20/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date