

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F07000005272

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Entity Name:** WATERMAN & WATERMAN ENTERPRISES INC.

**Current Principal Place of Business:**

1625 VALLEY QUAIL PLACE  
PASO ROBLES, CA 93446

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 3014  
PASO ROBLES, CA 93447

**New Mailing Address:**

**FEI Number:** 77-0577995

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NRAI SERVICES, INC  
515 E. PARK AVENUE  
TALLAHASSEE, FL 32301 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: P  
Name: WATERMAN, BROCK  
Address: 1625 VALLEY QUAIL PLACE  
City-St-Zip: PASO ROBLES, CA 93446

Title: VP  
Name: WATERMAN, MICHELLE  
Address: 1625 VALLEY QUAIL PLACE  
City-St-Zip: PASO ROBLES, CA 93446

I hereby 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 all other like empowered.

SIGNATURE: MICHELLE WATERMAN

VP

04/29/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date