## 2010 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F09000002018

Entity Name: WATERSHAPE CONSULTING, INC.

FILED Apr 26, 2010 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3830 VALLEY CENTRE DR., SUITE 705-316 3830 VALLEY CENTRE DR., SUITE 705-316

SAN DIEGO, CA 921303320 SAN DIEGO, CA 921303307 US

Current Mailing Address: New Mailing Address:

3830 VALLEY CENTRE DR., SUITE 705-316 3830 VALLEY CENTRE DR., SUITE 705-316

SAN DIEGO, CA 921303320 SAN DIEGO, CA 921303307 US

FEI Number: 76-0761559 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:

INCORP SERVICES, INC. 17888 67TH CT. NORTH LOXAHATCHEE, FL 33470

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 ( ).

US

## **OFFICERS AND DIRECTORS:**

Title: F

Name: PETERSON, DAVID J P/CEO
Address: 4908 BROOKBURN DR.
City-St-Zip: SAN DIEGO, CA 921302778 US

Title: S

Name: PETERSON, JENNIFER M SEC Address: 4908 BROOKBURN DR. City-St-Zip: SAN DIEGO, CA 921302778 US

Title: D

Name: PETERSON, HOWARD J DIRECTO

Address: 11139 BIXLER PLACE

City-St-Zip: GRASS VALLEY, CA 959498712 US

Title: VT

Name: HOWARD, LAURIE J CFO
Address: 4730 RANCHO DEL MAR TRAIL
City-St-Zip: SAN DIEGO, CA 921305210 US

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: DAVID J. PETERSON P 04/26/2010