

2/9/2021

Division of Corporations

F2100000826

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H21000054914 3))



H210000549143ABC-

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA00000023
Phone : (614)280-3338
Fax Number : (954)208-0845

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

2021 FEB 11 PM 1:58

FOREIGN PROFIT/NONPROFIT CORPORATION

WaterReuse Association Inc.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

Please keep original file date of 2/9/21

RECEIVED

2021 FEB 11 PM 1:58

Electronic Filing Menu

Corporate Filing Menu

Help

JBX
2/12/21

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

1. WaterReuse Association, Inc.

(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. California

(State or country under the law of which it is incorporated)

3. _____

(FEI number, if applicable)

4. December 18, 1990

(Date of Incorporation)

5. _____

(Date of duration, if other than perpetual)

6. _____
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 1121 I. Street, Suite 606, Sacramento, CA 95814

(Principal office street address)

(Current mailing address, if different)

8. Promote water recycling as a supplement source of water for the state

(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)

Name: CT Corporation System

Office Address: 1200 South Pine Island Road

Plantation

(City)

, Florida 33324

(Zip Code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Scott A White Assistant Secretary

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

2021 FEB 11 12:41

12. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS

Chairman Name: PATRICIA SINICROPI

Vice Chairman Address: 1199 NORTH FAIRFAX ST.

Director ALEXANDRIA, VA 22314

President _____

Vice President _____

Secretary Treasurer

Other: CEO Other: _____

Chairman Name: Karen Pallansch

Vice Chairman Address: 1800 Limerick St

Director ALEXANDRIA, VA 22314

President _____

Vice President _____

Secretary Treasurer

Other: _____ Other: _____

Chairman Name: Gilbert Trejo

Vice Chairman Address: 1154 Hawkins Blvd

Director EL PASO, TX 79925

President _____

Vice President _____

Secretary Treasurer

Other: _____ Other: _____

Chairman Name: Craig Litchy

Vice Chairman Address: 2999 Oak Road, Ste 490

Director Walnut Creek, CA 95476

President _____

Vice President _____

Secretary Treasurer

Other: _____ Other: _____

Chairman Name: Katherine Bell

Vice Chairman Address: 9020 Demery Court, Ste 1102

Director Brentwood, TN 37027

President _____

Vice President _____

Secretary Treasurer

Other: _____ Other: _____

Chairman Name: Brian Biesemeyer

Vice Chairman Address: 9379 E. San Salvador Dr.

Director Scottsdale, AZ 85258

President _____

Vice President _____

Secretary Treasurer

Other: _____ Other: _____

2021 FEB 11 11:11

NOTE: Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

13. _____
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Gilbert Trejo, President
(Typed or printed name and capacity of person signing application)



Secretary of State Certificate of Status

I, SHIRLEY N. WEBER, Ph.D., Secretary of State of the State of California, hereby certify:

Entity Name: WATEREUSE ASSOCIATION
File Number: C1677702
Registration Date: 12/18/1990
Entity Type: DOMESTIC NONPROFIT CORPORATION
Jurisdiction: CALIFORNIA
Status: ACTIVE (GOOD STANDING)

As of February 7, 2021 (Certification Date), the entity is authorized to exercise all of its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the Certification Date and does not reflect documents that are pending review or other events that may affect status.

No information is available from this office regarding the financial condition, status of licenses, if any, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of February 9, 2021.

SHIRLEY N. WEBER, Ph.D.
Secretary of State

2021 FEB 11 11:41 AM

Certificate Verification Number: Y6G5JVZ

To verify the issuance of this Certificate, use the Certificate Verification Number above with the Secretary of State Certification Verification Search available at bizfile.sos.ca.gov/certification/index.