

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H24425

Entity Name: DR. WATSON'S, INC.

FILED
Mar 20, 2009
Secretary of State

Current Principal Place of Business:

9844 STRING FELLOW RD
C3
ST JAMES CITY, FL 33956 US

Current Mailing Address:

9844 STRING FELLOW RD
C3
ST JAMES CITY, FL 33956 US

New Principal Place of Business:

9844 STRINGFELLOW RD
C3
ST JAMES CITY, FL 33956 US

New Mailing Address:

9844 STRINGFELLOW RD
C3
ST JAMES CITY, FL 33956 US

FEI Number: 59-2478106

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DURLING, ELIZABETH N
10151 W. HGIHWAY 316
REDDICK, FL 32686 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: PD () Delete
Name: DURLING, ELIZABETH N
Address: 10151 WEST HIGHWAY 316
City-St-Zip: REDDICK, FL 32686

Title: VD () Delete
Name: DURLING, KEITH O
Address: 3733 CARISSA LANE
City-St-Zip: OLNEY, MD 20832

Title: SD () Delete
Name: COOK, SUZANNE D
Address: PO BOX 830
City-St-Zip: BRYANTOWN, MD 20617

Title: TD () Delete
Name: DURLING, RICHARD F
Address: 6720 WINKLER ROAD
City-St-Zip: FORT MYERS, FL 33919

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:

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: ELIZABETH DURLING

PD

03/20/2009

Electronic Signature of Signing Officer or Director

Date