

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L16394

FILED  
Mar 19, 2009  
Secretary of State

Entity Name: THE WATER CLINIC, INC.

## Current Principal Place of Business:

124 JUPITER STREET  
JUPITER, FL 33458 US

## New Principal Place of Business:

## Current Mailing Address:

124 JUPITER STREET  
JUPITER, FL 33458 US

## New Mailing Address:

FEI Number: 65-0153398

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DUNLAP, DONOVAN C  
5698 PENNOCK POINT RD.  
JUPITER, FL 33458 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: DUNLAP, DONOVAN C.,  
Address: 5698 PENNOCK POINT RD.  
City-St-Zip: JUPITER, FL

Title: VP ( ) Delete  
Name: DUNLAP, JOYCE L.,  
Address: 5698 PENNOCK POINT RD.  
City-St-Zip: JUPITER, FL

Title: S ( ) Delete  
Name: DUNLAP, ANGIE L  
Address: 5698 PENNOCK POINT RD.  
City-St-Zip: JUPITER, FL 33458

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition  
Name: VEALEY, DAVID  
Address: 1101 SAN ANTONIO DRIVE  
City-St-Zip: PALM CITY, FL 34990

Title: S (X) Change ( ) Addition  
Name: VEALEY, DAVID  
Address: 1101 SAN ANTONIO DRIVE  
City-St-Zip: PALM CITY, FL 34990

Title: T ( ) Change (X) Addition  
Name: VEALEY, DAVID  
Address: 1101 SAN ANTONIO DRIVE  
City-St-Zip: PALM CITY, FL 34990

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: DONOVAN C. DUNLAP

PRES

03/19/2009

Electronic Signature of Signing Officer or Director

Date