## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000000513

FILED Feb 16, 2010 Secretary of State

Entity Name: WATER ENHANCEMENT & RESTORATION COALITION, INC.

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

1520 ROYAL PALM SQUARE BLVD., STE. 160 FT. MYERS, FL 33919

Current Mailing Address: New Mailing Address:

1520 ROYAL PALM SQUARE BLVD., STE. 160 FT. MYERS, FL 33919

FEI Number: 01-0583932 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:

FOREHAN, WALTER 125 S. GADSDEN ST., STE. 300 TALLAHASSEE, FL 32301 US

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: D

Name: PALMER, CARLA

Address: 6520 HIGHLAND PINES CIRCLE City-St-Zip: FORT MYERS, FL 33912

Title: D

Name: BARBER, RICK

Address: 7400 TAMIAMI TR. N. STE 200

City-St-Zip: NAPLES, FL 34108

Title:

Name: BAUER, MIKE
Address: 109 DEBRON DR
City-St-Zip: NAPLES, FL 34112

Title: [

Name: BARRACO, CARL

Address: 2271 MCGREGOR BOULEVARD, #100

City-St-Zip: FORT MYERS, FL 33901

Title: DTS

Name: ARNOLD, SHARON

Address: 1520 ROYAL PALM SQ BLVD., STE 160

City-St-Zip: FORT MYERS, FL 33919

Title:

Name: FIKOSKI, KIM

Address: 9990 COCONUT RD STE 200 City-St-Zip: BONITA SPRINGS, FL 34135

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SHARON ARNOLD T 02/16/2010