

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002436

FILED
May 11, 2009
Secretary of State

Entity Name: WATERWISE EDUCATIONAL FOUNDATION, INC.

Current Principal Place of Business:

1004 W PARSONS AVE
BRANDON, FL 33510

New Principal Place of Business:

Current Mailing Address:

1004 W PARSONS AVE
BRANDON, FL 33510

New Mailing Address:

FEI Number: 59-3591352 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

GREENWELL, MICHAEL
1004 W PARSONS AVE
BRANDON, FL 33510 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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SULTENFUSS, MARY E
Address: 407 BEVERLY BLVD.
City-St-Zip: BRANDON, FL 33511

Title: D () Delete
Name: GREENWELL, MICHAEL S
Address: 407 BEVERLY BLVD.
City-St-Zip: BRANDON, FL 33511

Title: D () Delete
Name: MILLER, AUGUST
Address: 600 BRISTOL FERRY RD
City-St-Zip: PORTSMOUTH, RI 028712007

Title: D () Delete
Name: VAN CLEVEN, NATALIE
Address: 821 BLACKBERRY LN
City-St-Zip: BRANDON, FL 33510

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

SIGNATURE: MICHAEL GREENWELL

D

05/11/2009

Electronic Signature of Signing Officer or Director

Date