2006 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Sep 06, 2006 8:00 am
Secretary of State
08-07-2006 90041 049 ***150.00

66023796

DOCUMENT # P05000048509

1. Entity Name
WATER LOG, INC.

Principal Place of Business	Mailing Address
1809 MICCOSUKEE COMMONS DRIVE STE 108 TALLAHASSEE, FL 32308	1809 MICCOSUKEE COMMONS DRIVE STE 108 TALLAHASSEE, FL 32308

08022006 Chg-P CR2E034 (11/05)

2. Principal Place of Business	3. Mailing Address
1909 Ermine Ct.	1909 Ermine Ct.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Tallahassee, FL	City & State: Tallahassee FL
Zip: 32308 Country: US	Zip: 32308 Country: US

4. FEI Number: 20-2609406 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
GLOVER, RICHARD A 1809 MICCOSUKEE COMMONS DRIVE STE 108 TALLAHASSEE, FL 32308	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when reinstating)

FILE NOW!!! FEE IS $150.00
Due by September 6, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LANGSTON, MICHAEL E 85 PARK AVE SOPCHOPPY, FL 32358	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Langston, Michael E. 1909 Ermine Ct. Tallahassee, FL 32308	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LANGSTON, CHRISTOPHER G 85 PARK AVE SOPCHOPPY, FL 32358	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LANGSTON, CHRISTOPHER G JR 85 PARK AVE SOPCHOPPY, FL 32358	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Michael E. Langston 8/2/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #