

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000099196

Entity Name: WETTAPS, INC

FILED
Mar 24, 2009
Secretary of State

Current Principal Place of Business:

5160 NW 51 CT
COCONUT CREEK, FL 33073

New Principal Place of Business:

Current Mailing Address:
2180 SW POMA DRIVE
PALM CITY, FL 34990

New Mailing Address:

5160 NW 51 CT
COCONUT CREEK, FL 33073

FEI Number: 42-1674461 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOTTING, BRIAN
5160 NW 51 CT
COCONUT CREEK, FL 33073 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: P () Delete
Name: BOTTING, BRIAN
Address: 5160 NW 51 CT
City-St-Zip: COCONUT CREEK, FL 33073

Title: VP () Delete
Name: BOTTING, PHIL A
Address: 5160 NW 51 CT
City-St-Zip: COCONUT CREEK, FL 33073

Title: D () Delete
Name: JASON, SAWYER
Address: 5160 NW 51 CT
City-St-Zip: COCONUT CREEK, FL 33073

Title: D () Delete
Name: COPE, KEVIN D
Address: 2738 SW ABELARD STREET
City-St-Zip: PORT ST LUCIE, FL 34953

Title: D () Delete
Name: STRINGER, RANDY
Address: 410 NW DORSET CT
City-St-Zip: PORT ST LUCIE, FL 34983

Title: D () Delete
Name: BRADLEY, DAVID A
Address: 5321 NW 58TH TERRACE
City-St-Zip: CORAL SPRINGS, FL 33067

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: ZAMBRANO, CARLOS
Address: 5160 NW 51 CT
City-St-Zip: COCONUT CREEK, FL 33073

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: BRIAN BOTTING

P

03/24/2009

Electronic Signature of Signing Officer or Director

Date