

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000023098

FILED  
Apr 21, 2009  
Secretary of State

Entity Name: H2O ASSOCIATES CORP.

## Current Principal Place of Business:

200 KELLY RD., BLDG. A-8  
NICEVILLE, FL 32578 US

## New Principal Place of Business:

200 KELLY RD., BLDG. C-4  
NICEVILLE, FL 32578 US

## Current Mailing Address:

P. O. BOX 3594  
MORGAN CITY, LA 70381 US

## New Mailing Address:

P. O. BOX 353  
VALPARAISO, FL 32580 US

FEI Number: 20-4388672      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WILLIAMS, JAMES E  
418 ESCANABA AVE  
VALPARAISO, FL 32580 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: WILLIAMS, JAMES E  
Address: 200 KELLY RD., BLDG. C-4  
City-St-Zip: NICEVILLE, FL 32578 US

Title: D ( ) Delete  
Name: HARRIS, SCOTT  
Address: 1712 ASHVIEW COVE  
City-St-Zip: NICEVILLE, FL 32578

Title: D ( ) Delete  
Name: GREGORY, CHRISTINE  
Address: 61 KELLY WAY  
City-St-Zip: VALPARAISO, FL 32580

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

## 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: D ( ) Change (X) Addition  
Name: KERR, ELIZABETH  
Address: 1041 4TH AVE  
City-St-Zip: SHALIMAR, FL 32679

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: JAMES E. WILLIAMS

P

04/21/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date