

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000033087

FILED
Apr 30, 2009
Secretary of State

Entity Name: MCCULLOUGH PREMIUM WATER, INC.

Current Principal Place of Business:

26 NORTH OCEAN DRIVE, GULFSTREAM SHORES
KEY LARGO, FL 33037

New Principal Place of Business:

26 NORTH OCEAN DRIVE
KEY LARGO, FL 33037

Current Mailing Address:

26 NORTH OCEAN DRIVE, GULFSTREAM SHORES
KEY LARGO, FL 33037

New Mailing Address:

26 NORTH OCEAN DRIVE
KEY LARGO, FL 33037

FEI Number: 20-4454927

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENDERSON, ELIZABETH
26 NORTH OCEAN DRIVE, GULFSTREAM SHORES
KEY LARGO, FL 33037 US

Name and Address of New Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE, SUITE 4
WESTON, FL 33331 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: MEGHAN RECORD, ASST. SEC.

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HENDERSON, DALE
Address: 26 NORTH OCEAN DRIVE, GULFSTREAM SHORES
City-St-Zip: KEY LARGO, FL 33037

Title: VPST () Delete
Name: HENDERSON, ELIZABETH
Address: 26 NORTH OCEAN DRIVE, GULFSTREAM SHORES
City-St-Zip: KEY LARGO, FL 33037

Title: D (X) Delete
Name: HENDERSON, ELIZABETH
Address: 26 NORTH OCEAN DRIVE, GULFSTREAM SHORES
City-St-Zip: KEY LARGO, FL 33037

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: STD (X) Change () Addition
Name: HENDERSON, ELIZABETH
Address: 26 NORTH OCEAN DRIVE, GULFSTREAM SHORES
City-St-Zip: KEY LARGO, FL 33037

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: ELIZABETH HENDERSON

STD

04/30/2009

Electronic Signature of Signing Officer or Director

Date