

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000011891

FILED
Apr 29, 2009
Secretary of State

Entity Name: WAKULLA WATERSHED COALITION, INC.

Current Principal Place of Business:

223 IROQUOIS RD.
CRAWFORDVILLE, FL 32327

New Principal Place of Business:

Current Mailing Address:

223 IROQUOIS RD.
CRAWFORDVILLE, FL 32327

New Mailing Address:

P. O. BOX 532
CRAWFORDVILLE, FL 32326

FEI Number: 20-8304890

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARR, H. PALMER
223 IROQUOIS RD.
CRAWFORDVILLE, FL 32327 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: HANSON, CHAD
Address: 14 EGRET ST. NORTH
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: S () Delete
Name: MONFORD, CHARLES
Address: 128 SUMMERWIND CIR E.
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: T (X) Delete
Name: CARR, H PALMER
Address: 223 IROQUOIS RD.
City-St-Zip: CRAWFORDVILLE, FL 32327

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: T (X) Change () Addition
Name: CARR, H. PALMER
Address: 223 IROQUOIS RD.
City-St-Zip: CRAWFORDVILLE, FL 32327

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: H. PALMER CARR

T

04/29/2009

Electronic Signature of Signing Officer or Director

Date