

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000072349

Entity Name: PERFECT WATER, INC.

FILED  
May 11, 2009  
Secretary of State

**Current Principal Place of Business:**

13611 PARKCREST BLVD  
#1128  
FORT MYERS, FL 33912

**New Principal Place of Business:**

**Current Mailing Address:**

13611 PARKCREST BLVD  
#1128  
FORT MYERS, FL 33912

**New Mailing Address:**

FEI Number: 26-2797983      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LEES, YVONNE  
5305 GLENLIVET RD  
FORT MYERS, FL 33907      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

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P,S      ( ) Delete  
Name: LEES, YVONNE R  
Address: 5305 GLENLIVET RD  
City-St-Zip: FORT MYERS, FL 33907

Title: VP,T      ( ) Delete  
Name: RUSSO, ANTHONY J  
Address: 13611 PARKCREST BLVD #1228  
City-St-Zip: FORT MYERS, FL 33912

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: S      (X) Change ( ) Addition  
Name: LEES, YVONNE R  
Address: 5305 GLENLIVET RD  
City-St-Zip: FORT MYERS, FL 33907

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

Title: P      ( ) Change (X) Addition  
Name: LEES, CHARLES T  
Address: 5305 GLENLIVET RD  
City-St-Zip: FORT MYERS, FL 33907

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: YVONNE LEES

S

05/11/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date