

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000104983

FILED
Sep 02, 2009
Secretary of State

Entity Name: TERRAQUATICS INTERNATIONAL, INC.

Current Principal Place of Business:

2225 E. WELCH ROAD
APOPKA, FL 32712

New Principal Place of Business:

876 PINE SHADOW DRIVE
APOPKA, FL 32712

Current Mailing Address:

2225 E. WELCH ROAD
APOPKA, FL 32712

New Mailing Address:

876 PINE SHADOW DRIVE
APOPKA, FL 32712

FEI Number: 26-3763216

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MATHEWS, WILLIAM
2225 E. WELCH ROAD
APOPKA, FL 32712 US

Name and Address of New Registered Agent:

MATHEWS, WILLIAM
876 PINE SHADOW DRIVE
APOPKA, FL 32712 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: WILLIAM MATHEWS

09/02/2009

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: D () Delete
Name: MELVIN, PAUL D
Address: 2225 E. WELCH ROAD
City-St-Zip: APOPKA, FL 32712

Title: D () Delete
Name: GRACE, STEVEN V
Address: 2225 E. WELCH ROAD
City-St-Zip: APOPKA, FL 32712

Title: D () Delete
Name: MATHEWS, WILLIAM V
Address: 2225 E. WELCH ROAD
City-St-Zip: APOPKA, FL 32712

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MELVIN, PAUL D
Address: 1228 FOXDEN RD.
City-St-Zip: APOPKA, FL 32712

Title: D (X) Change () Addition
Name: GRACE, STEVEN V
Address: 6651 WESTMONT DR.
City-St-Zip: ORLANDO, FL 32835

Title: D (X) Change () Addition
Name: MATHEWS, WILLIAM V
Address: 876 PINE SHADOW DR.
City-St-Zip: APOPKA, FL 32712

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: STEVEN V. GRACE

S

09/02/2009

Electronic Signature of Signing Officer or Director

Date