

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000020126

FILED  
Mar 06, 2012  
Secretary of State

Entity Name: BLUEWATER BENEFITS, INC.

**Current Principal Place of Business:**

2 PORTOFINO DRIVE  
SUITE 604  
PENSACOLA BEACH, FL 32561 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 222  
GULF BREEZE, FL 32562

**New Mailing Address:**

FEI Number: 26-4380416

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

AMERICAN SAFETY COUNCIL, INC.  
5125 ADANSON ST.  
SUITE 500  
ORLANDO, FL 32804 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

**OFFICERS AND DIRECTORS:**

Title: PVST  
Name: DUTTON, LYNN  
Address: 2 PORTOFINO DRIVE SUITE 604  
City-St-Zip: PENSACOLA BEACH, FL 32561 US

Title: D  
Name: DUTTON, LYNN  
Address: 2 PORTOFINO DRIVE SUITE 604  
City-St-Zip: PENSACOLA BEACH, FL 32561 US

I hereby 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 all other like empowered.

SIGNATURE: LYNN DUTTON

PVST

03/06/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date