

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 15, 2006 08:00 AM
Secretary of State

DOCUMENT # P38964					
1. Entity Name WATER WAITER, INC.					
Principal Place of Business 5801 THOMAS DR PANAMA CITY BCH. FL 32408 US		Mailing Address 5200 REDWING DR ALEXANDRIA VA 22312 US			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 54-1612346 Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				1st MOORE CR2E034 (10/05)	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
HILL, THOMAS W. 5606 PINETREE AVE PANAMA CITY BEACH FL 32408			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City	FL	Zip Code
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when re-issuing)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee Will Be \$550.00 Make Check Payable to Florida Department of State 9. Election Campaign Financing \$5.00 May 1 Trust Fund Contribution. ☐ Added to Fees					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	C	☐ Delete	TITLE	☐ Change ☐ Add	
NAME	HILL, CHARLES W., JR.		NAME	U000000433904	
STREET ADDRESS	5200 REDWING DRIVE		STREET ADDRESS	02/24/06-80038-002 150.00	
CITY-ST-ZIP	ALEXANDRIA VA		CITY-ST-ZIP		
TITLE	DP	☐ Delete	TITLE	☐ Change ☐ Add	
NAME	HILL, THOMAS W.		NAME		
STREET ADDRESS	5606 PINETREE AVE		STREET ADDRESS		
CITY-ST-ZIP	PANAMA CITY BCH. FL		CITY-ST-ZIP		
TITLE	DT	☐ Delete	TITLE	☐ Change ☐ Add	
NAME	HILL, DAVID M.		NAME		
STREET ADDRESS	5200 REDWING DRIVE		STREET ADDRESS		
CITY-ST-ZIP	ALEXANDRIA VA		CITY-ST-ZIP		
TITLE	DS	☐ Delete	TITLE	☐ Change ☐ Add	
NAME	HILL, JANE A.		NAME		
STREET ADDRESS	5200 REDWING DRIVE		STREET ADDRESS		
CITY-ST-ZIP	ALEXANDRIA VA		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change ☐ Add	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change ☐ Add	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>C. W. Hill Jr</u> <u>C. W. Hill Jr Chairman</u> <u>2/13/06 (703) 354-17</u>					