

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000021632

FILED
Mar 25, 2009
Secretary of State

Entity Name: WATERFRONT PROPERTY INVESTMENTS, INC.

Current Principal Place of Business:

405 DOUGLAS AVE.
SUITE 1955
ALTAMONTE SPRINGS, FL 32714 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 917359
LONGWOOD, FL 32791 US

New Mailing Address:

FEI Number: 59-3170637 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JUDGE, MARY
405 DOUGLAS AVE. SUITE 1955
ALTAMONTE SPRINGS, FL 32714 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: PST () Delete
Name: JUDGE, MARY
Address: PO BOX 917359 N/A
City-St-Zip: LONGWOOD, FL

Title: VP () Delete
Name: JUDGE, WALTER
Address: PO BOX 917359
City-St-Zip: LONGWOOD, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: JUDGE, MARY
Address: PO BOX 917359
City-St-Zip: LONGWOOD, FL 32791

Title: VP (X) Change () Addition
Name: JUDGE, WALTER E
Address: PO BOX 917359
City-St-Zip: LONGWOOD, FL 32791

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: WALTER E JUDGE

VP

03/25/2009

Electronic Signature of Signing Officer or Director

_____ Date