2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000068500

Address:

City-St-Zip:

Entity Name: WATERFORD INVESTOR SERVICES, INC.

FILED Apr 17, 2009 Secretary of State

Current P	rincipal Place	of Business:	New Princ	New Principal Place of Business:			
	TH HIGHLAND	AVE					
#2 CLEARWA	ATER, FL 3375	56 US					
Current M	lailing Addres	s:	New Maili	ng Address:			
	LDERS VIEW	DR.					
SUITE 601 RICHMON	ID, VA 23225	US					
FEI Number:	: 59-3528061	FEI Number Applied For ()	FEI Number Not Appl	icable ()	Certifica	ate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Address of	New Reg	jistered Agent:	
C/O C T C 1200 SOU PLANTATI	PORATION SYS ORPORATION TH PINE ISLAN ON, FL 33324	ISYSTEM ND RD	nurnose of changing it	ts registered	office or r	registered agent or both	
	e of Florida.	submits this statement for the	purpose of changing i	is registered	onice or i	egistered agent, or both,	
SIGNATUR	RE:						
	Electron	ic Signature of Registered Ag	jent			Date	
Election Car	mpaign Financing	Trust Fund Contribution ().					
OFFICER	S AND DIREC	TORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	PTD () WAINSCOTT, F 1201 S. HIGHL CLEARWATER	AND AVE. #2	Title: Name: Address: City-St-Zip:	() Change	() Addition	
Title: Name: Address: City-St-Zip:	LIEBOWITZ, RO	RS VIEW DR., 601	Title: Name: Address: City-St-Zip:	VP (X LEIBOWITZ, I 7501 BOULDE RICHMOND, V	ROGER F ERS VIEW	()Addition DR., 601	
Title: Name: Address: City-St-Zip:	SKALTSOUNIS,	RS VIEW DR., 601	Title: Name: Address: City-St-Zip:	() Change	() Addition	
Title: Name:	()	Delete	Title: Name:	CFO (FLANARY, CA		(X) Addition	

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.

Address:

City-St-Zip:

SIGNATURE: C. FRANKLIN FLANARY, II CFO 04/17/2009

7501 BOULDERS VIEW DR. 601

RICHMOND, VA 23225