

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000020494

FILED
Jul 17, 2007
Secretary of State

Entity Name: BLUE WATER OF PENSACOLA, INC.

Current Principal Place of Business:

1620 AIRPORT BLVD
#100A
PENSACOLA, FL 32504

New Principal Place of Business:

Current Mailing Address:

1620 AIRPORT BLVD
#100A
PENSACOLA, FL 32504

New Mailing Address:

FEI Number: 59-3561950

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHERL, MATT
1133 SAWGRASS ROAD
GULF BREEZE, FL 32563 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

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: P () Delete
Name: SCHERL, WADE
Address: 1390 TIGER LAKE DR.
City-St-Zip: GULF BREEZE, FL 32563

Title: S () Delete
Name: SCHERL, MATT
Address: 1133 SAWGRASS DRIVE
City-St-Zip: GULF BREEZE, FL 32563P

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: WADE SCHERL

PRES

07/17/2007

Electronic Signature of Signing Officer or Director

Date