

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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APPLICATION  
FOR



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P99000106576

1. Corporation Name

WATERMAID U.S.A., INC.

Principal Place of Business

Mailing Address

STE.263.15 PARADISE PLAZA  
SARASOTA FL 34239

STE.263.15 PARADISE PLAZA  
SARASOTA FL 34239

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

12/09/1999

5. FEI Number

65-0979027

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED

☒ \$8.75 Additional Fee required  
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
D	VARLEY, RICHARD E	STE.263,15 PARADISE PLAZA	SARASOTA FL 34239
			900004477089--0 -07/16/01--01050--010 ****300.00 ****300.00
			900004477089--0 -07/16/01--01050--011 *****8.75 *****8.75

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

SIMON, DAVID S ESQ.  
1800 2ND. STREET,STE.700  
SARASOTA FL 34236

Name

R. VARLEY

Street Address (P.O. Box Number is Not Acceptable)

SUITE 263

Suite, Apt. #

15 PARADISE PLAZA

City

SARASOTA

State

FL

Zip Code

34239

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of  
Registered Agent

*Richard E. Varley*  
REGISTERED AGENT MUST SIGN

Date

6/27/01

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(l), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*R.E. Varley*  
R.E. VARLEY

Date

6/27/01 841.316.0921

Daytime Phone #

CR2E040 (8/00)

**WATERMAID** (USA) Inc.

1-800-737-3390  
Suite 263, 15 Paradise Plaza  
Sarasota, Florida 34239  
(941) 316-0921 • (941) 316-0806

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6/27/01.

Dear Sir,

PLEASE BE ADVISED WE  
HAVE NOT RECEIVED OUR MAIL.  
(WE ARE AN AUSTRALIAN BASED  
HEAD OFFICE COMPANY.)  
THIS PROBLEM HAS BEEN FIXED

As per your instructions we  
enclose a check for \$308.75.

Yours faithfully,

Richard Valley  
Director,

