

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S31013

FILED
Jul 07, 2008
Secretary of State

Entity Name: WATER PLUS OF PINELLAS, INC.

Current Principal Place of Business:

9520 134TH STREET NORTH
SEMINOLE, FL 33776 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 4430
SEMINOLE, FL 337754430 US

New Mailing Address:

FEI Number: 59-3051010

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BELL-LINDSEY, SANDRA
9520 134TH STREET NORTH
SEMINOLE, FL 33776 US

Name and Address of New Registered Agent:

LINDSEY, GARY L PRES
9520 134TH STREET NORTH
SEMINOLE, FL 33776 US

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: GARY L. LINDSEY

07/07/2008

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: ST () Delete
Name: LINDSEY, SANDRA
Address: 9520 134TH STREET NORTH
City-St-Zip: SEMINOLE, FL 33776

Title: P () Delete
Name: LINDSEY, GARY LEE
Address: 9520 134TH STREET NORTH
City-St-Zip: SEMINOLE, FL 33776

Title: VP (X) Delete
Name: BELL, G. DANIEL
Address: 9520 134TH STREET NORTH
City-St-Zip: SEMINOLE, FL 33776 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: LINDSEY, GARY L PRES
Address: 9520 134TH STREET NORTH
City-St-Zip: SEMINOLE, FL 33776

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: GARY L. LINDSEY

PRES

07/07/2008

Electronic Signature of Signing Officer or Director

Date