

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V27002

Entity Name: VIRGINIA WATERS, P.A.

FILED
Apr 13, 2006
Secretary of State

Current Principal Place of Business:

5753 NW 120 TER
CORAL SPRINGS, FL 33076

New Principal Place of Business:

702 SW ST. VINCENT COVE
PORT ST. LUCIE, FL 34986 US

Current Mailing Address:

5753 NW 120 TER
CORAL SPRINGS, FL 33076

New Mailing Address:

702 SW ST. VINCENT COVE
PORT ST. LUCIE, FL 34986 US

FEI Number: 65-0433415

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WATERS, VIRGINIA
5753 NW 120 TER
CORAL SPRINGS, FL 33076 US

Name and Address of New Registered Agent:

WATERS, VIRGINIA
702 SW ST. VINCENT COVE
PORT ST. LUCIE, FL 34986 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:

04/13/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WATERS, VIRGINIA,
Address: 5753 NW 120 TER
City-St-Zip: CORAL SPRINGS, FL 33076

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WATERS, VIRGINIA,
Address: 702 SW ST. VINCENT COVE
City-St-Zip: PORT ST. LUCIE, FL 34986 US

I hereby certify that the information supplied with this filing does not qualify for the 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: VIRGINIA WATERS

PRES

04/13/2006

Electronic Signature of Signing Officer or Director

Date