

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011599

FILED
Apr 06, 2007
Secretary of State

Entity Name: BLACKMAN COMMUNITY WATER SYSTEM, INC.

Current Principal Place of Business:

7590 HIGHWAY 189 NORTH
BAKER, FL 32531

New Principal Place of Business:

Current Mailing Address:

7590 HIGHWAY 189 NORTH
BAKER, FL 32531

New Mailing Address:

FEI Number: 57-1218370 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COOK, JEANETTE C
7638 HIGHWAY 189 NORTH
BAKER, FL 32531 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: COOK, JEANETTE C
Address: 7638 HIGHWAY 189 NORTH
City-St-Zip: BAKER, FL 32531

Title: V () Delete
Name: THURBER, HENRY J
Address: 1097 VERNON JEFFERS ROAD
City-St-Zip: BAKER, FL 32531

Title: D () Delete
Name: LEE, JAMES D
Address: 2426 JOHNSON RD.
City-St-Zip: BAKER, FL 32531

Title: ST () Delete
Name: RAGEL, HOMER
Address: 2067 L.G. RUSSELL ROAD
City-St-Zip: BAKER, FL 32531

Title: D () Delete
Name: JOHNSON, TERESA
Address: 8211 TOMMY STEELE RD.
City-St-Zip: BAKER, FL 32531

Title: D () Delete
Name: TURNER, JIM C
Address: 7938 RED BARROW ROAD
City-St-Zip: BAKER, FL 32531

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JEANETTE C. COOK

P

04/06/2007

Electronic Signature of Signing Officer or Director

_____ Date