

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P94000078780 (1)

1. Corporation Name

SUNDANCE WATER SYSTEMS, INC.



Principal Place of Business

Mailing Address

6931 ORIENT RD  
TAMPA FL 33610  
US

1539 SW 15<sup>th</sup> WAY  
SUITE B  
BELL, FLORIDA 32619  
USA

6931 ORIENT ROAD  
TAMPA FL 33610-9447  
US

2. Principal Place of Business

2a. Mailing Address

21 1539 SW 15<sup>th</sup> WAY

26 SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 SUITE B

27

City & State

City & State

23 BELL, FLORIDA

28

Zip

Country

Zip

Country

24 32619

25

29

30

3. Date Incorporated or Qualified  
10/24/1994

3a. Date of Last Report  
01/26/1995

4. FEI Number

65-0533370

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TURLEY, JUDY D  
6931 ORIENT RD  
TAMPA FL 33610

81 Name

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

1539 SW 15<sup>th</sup> WAY, SUITE B

83

BELL

84 City

FL

85 Zip Code

32619

11. Pursuant to the provisions of Sections 607.0507 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

*Judy D. Turley*

JUDY D. TURLEY

22 JANUARY 1996

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME TURLEY, JUDY D  
STREET ADDRESS 13915 FLETCHERS MILL DRIVE  
CITY-ST-ZIP TAMPA FL

TITLE ☐ DELETE

NAME KNIGHT, KENNETH D  
STREET ADDRESS 13915 FLETCHERS MILL DRIVE  
CITY-ST-ZIP TAMPA FL

TITLE ☐ DELETE

NAME KHACHIKIAN, ARTOOSH  
STREET ADDRESS 10409 NORTH 27<sup>th</sup> STREET  
CITY-ST-ZIP TAMPA 33612

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SECRETARY - TREAS.

☒ Change

☐ Addition

1539 SW 15<sup>th</sup> WAY  
BELL, FLORIDA 32619

PRESIDENT

☒ Change

☐ Addition

1539 SW 15<sup>th</sup> WAY  
BELL, FLORIDA 32619

VICE PRESIDENT

☐ Change

☒ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Judy D. Turley*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

22 JAN 96

(904) 463-7395

Date

Daytime Phone #

CR2E034 (12/95)