

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2006 8:00 am
Secretary of State

01-10-2006 90031 021 ****61.25

DOCUMENT # 709581 1. Entity Name BRATT-DAVISVILLE WATER SYSTEM, INC.					
Principal Place of Business 11100 HWY 97 MC DAVID, FL 32568 US			Mailing Address P.O. DRAWER 770 ATMORE, AL 36504 US		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.		60000830 	
City & State		City & State		4. FEI Number 63-0596247	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent RYLAND, BEVERLY 5650 PINE FOREST RD WALNUT HILL, FL 32568				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
Filing Fee Is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PELT, JAMES D 9410 HWY 47 CENTURY, FL 32535	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP JOHNSON, JOHNNIE 2950 PURDUE RD MC DAVID, FL 32568	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST RYLAND, BEVERLY 5650 PINE FOREST RD WALNUT HILL, FL 32588	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WHEELER, BECKY 4421 N HWY 98 MC DAVID, FL 32568	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PEBBLES, DARIN 7036 MCCLHANEY RD CENTURY, FL 32535	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BOD KIMMONS, RAMOND 5631 PINE FOREST RD. WALNUT HILL, FL 32568	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Joseph Sigafosse 7240 McElhaneY Rd Century 71 32535 ☒ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Beverly Ryland</i> <i>Sec. / 2ma</i> <i>1/6/05</i> <i>850-327-6718</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					