

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710814

Entity Name: SOUTH SHORE WATER ASSOCIATION, INC.

Current Principal Place of Business:

1454 EAST US HWY 27
CLEWISTON, FL 33440

Current Mailing Address:

PO BOX 218
CLEWISTON, FL 33440

FEI Number: 59-1141578

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCCALLUM, JOHN T
626 W SUGARLAND HWY
CLEWISTON, FL 33440 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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title P
Name HATFIELD, DWIGHT
Address 325 RIVIERA VISTA BLVD
City-State-Zip: LABELLE FL 33935

Title D
Name STILES, STEVEN N
Address P.O. BOX 1034
City-State-Zip: CLEWISTON FL

Title VPD
Name PERRY, TOMMY
Address PO BOX 1029
City-State-Zip: CLEWISTON FL 33440

Title D
Name RIDGDILL, MORRIS
Address P.O.BOX 447
City-State-Zip: CLEWISTON FL 33440

Title STD
Name MCCALLUM, JOHN
Address 626 W SUGARLAND HWY
City-State-Zip: CLEWISTON FL

I hereby 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 all other like empowered.

SIGNATURE: HATFIELD, DWIGHT

PRESIDENT

01/26/2022

Electronic Signature of Signing Officer/Director Detail

Date