2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000059163

Entity Name: ACME WATER SUPPLY & MANAGEMENT COMPANY

FILED Apr 15, 2016 Secretary of State CC7419370359

Current Principal Place of Business:

200 W. WEATHERFIELD AVENUE ALTAMONTE SPRINGS. FL 32714

Current Mailing Address:

2335 SANDERS ROAD NORTHBROOK, IL 60062

FEI Number: 55-0877915 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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	PRESIDENT	Title	V
Title	PRESIDENT	Title	

Name HOY, JOHN Name FLYNN, PATRICK

Address 200 WEATHERSFIELD AVENUE Address 200 WEATHERSFIELD AVENUE

City-State-Zip: ALTAMONTE SPRINGS FL 32714 City-State-Zip: ALTAMONTE SPRINGS FL 32714

TitleVP, SECRETARYTitleASST. SECRETARYNameSTOVER, JOHNNamePLUMB, DEBRA

Address 2335 SANDERS ROAD Address 2335 SANDERS ROAD

City-State-Zip: NORTHBROOK IL 60062 City-State-Zip: NORTHBROOK IL 60062

Title ASST. SECRETARY Title TREASURER

Name HSU. CHERYL Name ANDREJKO, JIM

Address 13040 CADENCIA PLACE Address 2335 SANDERS ROAD

City-State-Zip: SAN DIEGO CA 92130 City-State-Zip: NORTHBROOK IL 60062

Title DIRECTOR Title DIRECTOR

NameSPARROW, LISANameCUMMING, HAMISHAddress2335 SANDERS ROADAddress2335 SANDERS ROADCity-State-Zip:NORTHBROOK IL 60062City-State-Zip:NORTHBROOK IL 60062

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

SIGNATURE: DEBRA PLUMB ASSISTANT SECRETARY 04/15/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name ANDERSON, BRUCE Name WOZNEY, CAROL

Address 2335 SANDERS ROAD Address 2335 SANDERS ROAD

City-State-Zip: NORTHBROOK IL 60062 City-State-Zip: NORTHBROOK IL 60062