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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT #

171056

(5)

TRUMBULL WATER SERVICES OF NORTHWEST FLORIDA, IN



					<u> </u>
rincipal Place o	of Business	Mailing Address			
da trumbu	JLL JR	DA TRUMBULL JR			
315 E. 15TH ST. PANAMA CITY FL 32405		315 E. 15TH ST. Panama City fl 32405			
PANAMA CI	IIT FL 32405	PANAMA ON LITE SE		 Date Incorporated or Qualified 10/31/1952 	3a. Date of Last Report 01/27/1995
. Principal Plac	ce of Business	2a. Mailing Address		4. FEI Number	Applied For
]		26		59-0683483	Not Applicable
Suite, Apt. #,	, etc.	Suite, Apt. #, €tc.		5 Codificate of Status Desired	S8.75 Additional Fee Required
Otto & State		City & State	·— ·— ·— ·	6. Election Campaign Financing	\$5.00 May Be
City & State		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zıp	Country	8. This corporation has liability for it	
	25	29	30		
	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New R	egistered Agent
			81 Name		
TRUMBULL JR,D A 315 E. 15TH ST.			82 Street Ad	ddress (P.O. Box Number is Not Acceptable)	
		83			
PANAM	AA CITY FL 32401		63		
			84 City		FL 85 Zip Code
				ocration submits this statement for the pur	
S	Signature, typed or printed name of registered agent		OTE Registered Agent signature recu		DATE
2.	OFFICERS AN	ID DIRECTORS	13.	uied when reinstalling) ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12
2. ILE	OFFICERS AN		13. 1. 1 TITLE		
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2. TLE AME THEFT ADDRESS	OFFICERS AN PV TRUMBULL, D.A., JR. 315 E. 15TH ST.	ID DIRECTORS	13. 1. 1 TITLE 1.2 NAME 1.3 STREET ADDRESS		ICERS AND DIRECTORS IN 12
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4. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not quality for the exemption stated in section 1.19.0 (3)(x), indicated a statutes, 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 attaching of with an address.

SIGNATURE:

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

2/14/96 904-763-172