

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 03, 2000 8:00 am
Secretary of State
 04-03-2000 90125 021 ***158.75

DOCUMENT # 291141

1. Entity Name

FLORIDA CITIES WATER COMPANY

Principal Place of Business

**4837 SWIFT RD
 SUITE 100
 SARASOTA FL 34231**

Mailing Address

**4837 SWIFT RD
 SUITE 100
 SARASOTA FL 34231-5157**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-1094814**

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ALLEN, GERALD S
 4837 SWIFT RD
 SUITE 100
 SARASOTA FL 34231**

Name

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

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2000 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PDC	<input type="checkbox"/> Delete
NAME	ALLEN, GERALD S	
STREET ADDRESS	4837 SWIFT ROAD SUITE #100	
CITY-ST-ZIP	SATASOTA FL 34231	
TITLE	VD	<input type="checkbox"/> Delete
NAME	ACOSTA, MICHAEL	
STREET ADDRESS	4837 SWIFT RD #100	
CITY-ST-ZIP	SARASOTA FL 34231	
TITLE	VT	<input type="checkbox"/> Delete
NAME	MURPHY, MICHAEL	
STREET ADDRESS	4837 SWIFT RD. #100	
CITY-ST-ZIP	SARASOTA FL 34231	
TITLE	CAS	<input type="checkbox"/> Delete
NAME	SCHIFANO, JOSEPH	
STREET ADDRESS	4837 SWIFT RD SUITE #100	
CITY-ST-ZIP	SARASOTA FL 34231	
TITLE	S	<input type="checkbox"/> Delete
NAME	CHUBBUCK, ANITA J.	
STREET ADDRESS	4837 SWIFT RD., #100	
CITY-ST-ZIP	SARASOTA FL 34231	
TITLE	D	<input type="checkbox"/> Delete
NAME	MCNAIRY, CHARLES	
STREET ADDRESS	201 ALHAMBRA CIR	
CITY-ST-ZIP	CORAL GABLES FL 33134	

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL 34231	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MURPHY, MICHAEL E	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Gerald S. Allen

March 24, 2000

941-925-3088

Date

Daytime Phone #

CR2E034 (9/99)