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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

341487

DOCUMENT #

1. Corporation Name

HOBE SOUND WATER COMPANY

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City & State Ci	Principal Place of Business BOX 68 RIVER RD. HOBE SOUND FL 33475-0068		Mailing Address BOX 68 RIVER RD. HOBE SOUND FL 33475-0068		3. Date Incorporated or Qualified	3a. Date 04/26/1995		
Suito, Apt. #, etc.	 -ŋ	ice of Business	F			4. FE! Number 233001		
27	<u> </u>			<u>-1</u>			\$8.75 Additional	
Zop Country Zop Country Zop Country Zop Country Zop Country Zop Country Zop Sop Sop Not composed in his field by for indepth tax under is 199-032, and 199-190, Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent 20, Name and Address 20, Name and Add	22			¬		5. Certificate of Status Desired		
25	City & State		 1					
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BEDWELL, ANN ESTRADA RD HOBE SOUND FL 33455 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City		g. Name and Address of Current				10. Name and Address of New Ro	gistered Agent	
ESTRADA RD HOBE SOUND FL 33455 82 Street Address (P-D. Box Number's Not Acceptable) 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am family and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE SIGNATURE SIJutus, bysed or printed name of ingelectate agent and to a registable. PD OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 12 NAME 12. PD OFFICERS AND DIRECTORS 13. SIRECT ADDRESS CITY 51-2P 1011 REED, NATHANIEL REED, NATHANIEL REED, NATHANIEL REED, NATHANIEL REED, ADRIEN P. DELETE 2 1 TITLE REED, ADRIEN P. DELETE 2 1 TITLE REED, ADRIEN P. DELETE 2 1 TITLE REED, ADRIEN P. DELETE 3 1 TITLE REED, ADRIEN P. DELETE 3 1 TITLE REED, ADRIEN P. DELETE 4 1 TITLE REED, ADRIEN P. DELETE 3 1 TITLE REED, ADRIEN P. DELETE 4 1 TITLE REED, ADRIEN P. DELETE 5 1 TITLE REED, ADRIEN P. DELETE Change: DEACH RODRESS CITY 51-2P TO Change: DELETE CHANGES CITY 51-2P TO Change: DELETE 5 1 TITLE REED, ADRIEN P. DELETE Change: DELETE Change: DELETE CHANGES CITY 51-2P TO Change: DELETE CHANGES CITY 51-2P	DEDMI	TII AAMI		81	Name			
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CITY-ST-ZIP 64 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further	CITY-ST-ZIP	f	with this filing is voluntarily for	6.4 CITY	ST-ZIP	My for the exemption stated in Section 119	07(3)(k) Florida Statutes I further	

coerus that the information 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 33 judganged, or on an attack mynthing a address.

SIGNATURE:

167.546.2511