2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704930

FILED Jan 11, 2007 Secretary of State

Entity Name: WAHNETA WATER SYSTEM, INC.

Current Principal Place of Business:				New Principal Place of Business:			
106 EIGHTH STREET, EAST-WAHNETA WINTER HAVEN, FL 33880 US Current Mailing Address:				106 EIGHTH WAHNETA STREET, EAST WINTER HAVEN, FL 33880 US New Mailing Address:			
FEI Number:	59-1093070	FEI Number Applied For()	FEI Nun	nber Not Appli	icable ()	Certificate of Status De	sired ()
Name and	Address of (Current Registered Agent:		Name and	Address of N	lew Registered Ager	nt:
HAMM, WILLIAM C., JR. 120 EAST PINE STREET SUITE 5 LAKELAND, FL 33801 US				HAMM, WILLIAM C., JR. 1828 S FLORIDA AVE LAKELAND, FL 33802 US			
	named entity of Florida.	submits this statement for the p	ourpose o	f changing it	s registered o	ffice or registered age	ent, or both,
SIGNATURE: FLOYCE WHITTINGTON						01/11/2007	
	Electro	nic Signature of Registered Age	ent			Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	JOHN RANDAL 100 SURF DR.) Delete L LAMBERT, N, FL 33880 US		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	JANICE CROW 114 2ND TERF) Delete /LEY, ACE WEST WAHNETA N, FL 33880 US		Title: Name: Address: City-St-Zip:	DVP (X) WILLIAM DEHA 420 4TH WAHN WINTER HAVEN	ETA ST E	
Title: Name: Address: City-St-Zip:	LEON FEAGIN 450 4TH STRE) Delete EET WAHNETA EAST N, FL 33880 US		Title: Name: Address: City-St-Zip:	JANICE CROW 114 2ND WAHN	Change () Addition LEY, IETATERRACE WEST N, FL 33880 US	
Title: Name: Address: City-St-Zip:	WILLIAM DEHA 420 4TH ST E			Title: Name: Address: City-St-Zip:	D (X) BARBARA COX 120 6TH WAHN WINTER HAVEN	ETA ST E	
Title: Name: Address: City-St-Zip:	S (FLOYCE WHIT P.O BOX 39 EAGLE LAKE,	•		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address:	D (CARL BRYANT 510 AVE A, E \			Title: Name: Address:	()	Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

City-St-Zip:

SIGNATURE: FLOYCE WHITTINGTON S 01/11/2007

WINTER HAVEN, FL 33880 US

City-St-Zip: