2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704930

FILED Apr 21, 2009 Secretary of State

Entity Name: WAHNETA WATER SYSTEM, INC.

Current Principal Place of Business: New Principal Place of Business: 106 EIGHTH WAHNETA STREET, EAST WINTER HAVEN, FL 33880 **Current Mailing Address: New Mailing Address:** 106 EIGHTH WAHNETA STREET, EAST WINTER HAVEN, FL 33880 FEI Number: 59-1093070 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HAMM, WILLIAM C., JR. 1828 S FLORIDA AVE US LAKELAND, FL 33802 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition JOHN RANDALL LAMBERT Name: Name: 100 SURF DR. Address: Address: City-St-Zip: WINTER HAVEN, FL 33880 US City-St-Zip: Title: () Delete Title: () Change () Addition WILLIAM DEHART Name: Name: Address: 420 4TH WAHNETA ST E Address: City-St-Zip: WINTER HAVEN, FL 33880 US City-St-Zip: Title: () Delete Title: () Change () Addition JANICE CROWLEY Name: Name: 114 2ND WAHNETATERRACE WEST Address: Address: City-St-Zip: WINTER HAVEN, FL 33880 US City-St-Zip: Title: Title: () Change () Addition () Delete Name: BARBARA COX Name: 120 6TH WAHNETA ST E Address: Address: City-St-Zip: WINTER HAVEN, FL 33880 US City-St-Zip: Title: () Delete Title: () Change () Addition FLOYCE WHITTINGTON Name: Name: P O BOX 39 Address: Address: City-St-Zip: EAGLE LAKE, FL 33839 US City-St-Zip: Title: () Delete Title: (X) Change () Addition CARL BRYANT CHRISTY PETERSON Name: Name: Address: 510 AVE A, E WAHNETA Address: 621 AVE A, E WAHNETA WINTER HAVEN, FL 33880 US WINTER HAVEN, FL 33880 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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.

SIGNATURE: FLOYCE WHITTINGTON S 04/21/2009