FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF COEPORATIONS

DOCUMENT # 1. Corporation Name

706788

FLORIDA WATER & POLLUTION CONTROL OPERATORS ASSO CIATION INCORPORATED

Principal Place of Business Mailing Address 18392 OAKLEAF CT. P.O. BOX 109602 JUPITER FL 33458 PALM BEACH GARDENS FL 33410

FILED Feb 04 1998 8:00am Secretary of State



Applied For

X4314

(561) 627-2900

3. Date Incorporated or Qualified

02/03/1964 4. FEI Number

| | | | | | 59-2780778 | | Not Applicable | |
|---|--|------------------------------|--|---|-------------------------------------|---------------------|----------------------|--|
| ⊢ '. | | Mailing Address | | | 5. Certificate of Status Desired | IJ | \$8.75 Additional | |
| 21 [0] | 110000000000000000000000000000000000000 | | | | 5. Octanoate of Status Desired | 192.1 | Fee Required | |
| Suite, Apt | | | | 6. Election Campaign Financing | | \$5.00 May Be | | |
| 22 27 | | | | Trust Fund Contribution | | Added to Fees | | |
| City & State | | | | 7. Is this nonprofit corporation a h | | | | |
| 23 Juno 13 each + L 28 | | | | | Yes Wo | | | |
| Zip | 33-108 Country L | Zip | Country | j | 8. This corporation owes or has p | | | |
| 24 | 9. Name and Address of Current Regis | 30 |) | | Personal Property Tax due June | | Yes No | |
| | a. Name and Address of Current Regis | | 10. Name and Address of New Registered Agent | | | | | |
| Name PICLIOD, PILA | | | | <u> </u> | Bishop Kim | | | |
| BISHOP, RIM | | | | eet Address (P.O. Box Number is Not Acceptable) | | | | |
| 18392 OAK LEAFCOURT 18392 | | | | | H Sea Oct 5 (|)61V < | <u> </u> | |
| JUPITER FL 33458 | | | | | | | | |
| | | | 84 City | | ~ | | 85 Zip Code | |
| 11 Duestiont | to the available of Continue Of 7 0500 and 6 | 17.4500 FI- 23- 00-11 | | <u>5 Ux</u> | 10 Beach | FL | 33408 | |
| office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Herethy accept the annointment as registered | | | | | | | | |
| 11. Pursuant to the provisions of Sections 617-6562 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or 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 familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. | | | | | | | | |
| SIGNATURE 17198 | | | | | | | | |
| 12. | Signature, typed or printed name of legistered agent and title OFFICERS AND DIREC | | gistered Agent signat | ure required | | DATE CEDS AND D | UDEOTODE IN 10 | |
| TITLE | ST ST | DELETE | 1.1 TITLE | 157 | ADDITIONS/CHANGES TO OFFICE | | Change Addition | |
| NAME | BISHOP, RIM | | 1.2 NAME | | | | 1 cuange | |
| STREET ADDRESS | 18392 OAK LEAF CT | | | 10 | shop Kims De | ~17°C | | |
| | JUPITER FL | | 1.3 STREET ADDRESS | 1 - | (1/ 50-51 | | 2100 | |
| CITY-ST-ZIP TITLE | D | DELETE | 1.4 CITY-ST-ZIP 2.1 TITLE | 57 | | 7 33 | Change Addition | |
| NAME | KAMIEN, TED | | | | | <u></u> | f Criange L Addition | |
| STREET ADDRESS | 8941 SE SANDCASTLE CIRCLE | | 2.2 NAME | | emien, Ted | | - | |
| CITY-ST-ZIP | HOBESOUND FL 33455 | | 2.3 STREET ADDRESS | · | | | | |
| TITLE | STD | DELETE | 2. 4 CITY-ST-ZIP 3.1 TITLE | + | | *** | Change Addition | |
| NAME | SHOUP, MARK | | | Y | o \- | | Change | |
| STREET ADDRESS | 239-B SIMPSON RIDGE CIRCLE | | 3.2 NAME | 1 | out inject Ar | < 0 V C | | |
| | KISSIMMEE FL | | 3.3 STREET ADDRESS | دئم ا' | 2 strice of E | 3476 | - : 1 | |
| CITY-ST-ZIP TITLE | DPP | L- DELETE | 3.4. CITY-ST-ZIP 4.1 TITLE | 1 3.1 | F-C1808,1-C | | Change Addition | |
| NAME | CARPENTER, JESSIE L | EL DELETE | | | 40,05001 | L | Change C Addition | |
| STREET ADDRESS | 7655 SUS #1 #3 | | 4. 2 NAME | 125 | SINE 20 AVE | 50 C | | |
| | TITUSVILLE FL | | 4.3 STREET ADDRESS | ر چي ا | 3, 7, 7, 2, 7, 1, 2 | | 3308 | |
| CITY-ST-ZIP | P | DELETE | 4.4 CITY-ST-ZIP 5.1 TITLE | 1 | carder date, r | <u> </u> | Change Addition | |
| NAME | STENBERG, RICHARD | בין טניננינ | | PE | T | | Change | |
| | 3900 FIRST LANE | | 5.2 NAME | K | g-acg ->t<0pec3 | , K,ch | 100 I | |
| STREET ADDRESS | VERO BEACH FL | | 5.3 STREET ADDRESS | | | | } | |
| CITY-ST-ZIP TITLE | VENU BEAUTI FL | I DELETE | 5.4 CITY - ST-ZIP | +- | | | | |
| NAME | SORAH, GRADY | ☐ NETE IE | 6.1 TITLE | P | ah, Grady | 12 | Change | |
| | | | 6.2 NAME | | ar, Grady | | İ | |
| STREET ADDRESS | 5911 ACLAVISTA DRIVE | J | 6.3 STREET ADDRESS | | | | | |
| CITY-ST-ZIP | PUNTAGORDA FL erify that the information supplied with this fi | ling does not qualify for th | 6.4 CITY-ST-ZIP | lod is S- | otion 110 07/2)/i) Clasida Otal 1 1 | further as a series | - AL - AL - 1-5 | |
| 14. 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 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 | | | | | | | | |
| 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 thistee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachgrent with an address. | | | | | | | | |