

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707161

FILED
Feb 05, 2009
Secretary of State

Entity Name: TAFT WATER ASSOCIATION, INC.

Current Principal Place of Business:

1129 PINE STREET
ORLANDO, FL 32824

New Principal Place of Business:

Current Mailing Address:

1129 PINE STREET
ORLANDO, FL 32824

New Mailing Address:

FEI Number: 59-1052665

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOMINY, ALAN R
9411 WALDSTRASSE CT
ORLANDO, FL 32824 US

Name and Address of New Registered Agent:

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:

Title: V () Delete
Name: DOMINY, KEITH
Address: 1226 PINE ST
City-St-Zip: ORLANDO, FL 32824

Title: D () Delete
Name: HARKEY, SAMUEL
Address: 1010 5TH STREET
City-St-Zip: ORLANDO, FL 32824

Title: D () Delete
Name: DOMINY, ALAN R
Address: 9411 WALDSTRASSE CT
City-St-Zip: ORLANDO, FL 32824

Title: D () Delete
Name: SWEENEY, CAROL
Address: 1110 4TH STREET
City-St-Zip: ORLANDO, FL 32824

Title: P () Delete
Name: MOHLER, DAVID
Address: 9404 WALDSTRASSE CT
City-St-Zip: ORLANDO, FL 32824

Title: D () Delete
Name: DOMINY, JACK
Address: 1201 1ST STREET
City-St-Zip: ORLANDO, FL 32824

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: ALAN DOMINY

D

02/05/2009

Electronic Signature of Signing Officer or Director

Date