

FILE NOW: FILING FEE IS \$61.25

FILED

Jul 17 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Morkman Secretary of State DIVISION OF CORPORATIONS
---	---	--

DOCUMENT # 710799 (8)
1. Corporation Name
MIDWAY-CANAAN COMMUNITY WATER ASSOCIATION, INC.



Principal Place of Business 2310 JITWAY ST. P.O. BOX 1322 SANFORD FL 32772-1322	Mailing Address P.O. BOX 1322 SANFORD FL 32772-1322 US
--	---

3. Data Incorporated or Qualified 04/27/1966	3a. Date of Last Report 02/09/1996
---	---------------------------------------

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country	4. FEI Number 23-7024689	Applied For Not Applicable
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No			

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MERKERSON, WILLIE J.
3051 KINGS RD.
SANFORD FL 32771

President/manager of water house

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

11. Pursuant to the provisions of Sections 617.0502 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D WILLIAMS, THEODORE ☒ DELETE	1.1 TITLE	P BUTLER, HELEN S. ☐ Change ☒ Addition
NAME	WILLIAMS, THEODORE	1.2 NAME	978 High Point Loop
STREET ADDRESS	2340 JITWAY AVENUE	1.3 STREET ADDRESS	LONGWOOD, FL 32750
CITY-ST-ZIP	SANFORD FL	1.4 CITY-ST-ZIP	
TITLE	D WILLIAMS, GLADY ☒ DELETE	2.1 TITLE	P CUMMINGS, WILLIE C. ☐ Change ☒ Addition
NAME	WILLIAMS, GLADY	2.2 NAME	2361 Jitway Ave.
STREET ADDRESS	3150 MIDWAY AVENUE	2.3 STREET ADDRESS	SANFORD, FL 32771
CITY-ST-ZIP	SANFORD FL	2.4 CITY-ST-ZIP	
TITLE	VD HUDLEY, BARNARD ☐ DELETE	3.1 TITLE	P CAMBRIDGE, GEORGE ☐ Change ☒ Addition
NAME	HUDLEY, BARNARD <i>Vice President</i>	3.2 NAME	2156 Sipes, Ave.
STREET ADDRESS	3401 HUGHEY ST.	3.3 STREET ADDRESS	SANFORD, FL 32771
CITY-ST-ZIP	SANFORD FL	3.4 CITY-ST-ZIP	
TITLE	D GLENN, ALTON ☐ DELETE	4.1 TITLE	P WILSON, Rev. LEONARD ☐ Change ☒ Addition
NAME	GLENN, ALTON <i>Member</i>	4.2 NAME	3724 MAIN St.
STREET ADDRESS	2200 CENTER ST.	4.3 STREET ADDRESS	SANFORD, FL 32771
CITY-ST-ZIP	SANFORD FL	4.4 CITY-ST-ZIP	
TITLE	D PERRY, JANICE ☐ DELETE	5.1 TITLE	
NAME	PERRY, JANICE <i>Secretary</i>	5.2 NAME	
STREET ADDRESS	2070 RUFF ROAD	5.3 STREET ADDRESS	
CITY-ST-ZIP	SANFORD FL	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

(0) (407) 323-1714