**FILED** 

## **2001 UNIFORM BUSINESS REPORT (UBR)**

## Jul 31, 2001 8:00 am Secretary of State **DOCUMENT # 710799** 1. Entity Name 07-31-2001 90240 013 \*\*\*\*61.25 MIDWAY-CANAAN COMMUNITY WATER ASSOCIATION, INC. Principal Place of Business Mailing Address 2310 JITWAY ST. P.O. BOX 1322 SANFORD FL 32772 P.O. BOX 1322 SANFORD FLA 32772-1322 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 23-7024689 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) MERKERSON, WILLIE J. 3051 KINGS RD. SANFORD FL 32771 City Zip Code 8. 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Department of State After September 12, 2001, min. will be \$236.25 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10 11. Celete TITLE ☐ Change □ Addition CHISOLM, BENJAMIN NAME NAME 1970 SIPES AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SANFORD FL 32771 CITY-ST-ZIP TITLE Delete Change Addition CUMMINGS, WILLIE C NAME NAME 2361 JITWAY AVE. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SANFORD FL 32771 CITY-ST-ZIP TITLE TITLE ☐ Addition ☐ Delete ☐ Change HUDLEY, BARNARD NAME 3401 HUGHEY ST. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SANFORD FL 32771 CITY-ST-ZIP DM TITLE ☐ Delete TITLE Change ☐ Addition GLENN, ALTON NAME NAME 2200 CENTER ST. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SANFORD FL 32771 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition PERRY, JANICE NAME NAME STREET ADDRESS 2070 RUFF ROAD STREET ADDRESS CITY-ST-ZIP SANFORD FL 32771 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition CAMBRIDGE, GEORGE NAME NAME STREET ADDRESS 2156 SIPES AVE. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SANFORD FL 32771 12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

illie I Merkerson