

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 22, 2007 8:00 am
Secretary of State

03-22-2007 90009 044 ****70.00

DOCUMENT # 713609 1. Entity Name CHUMUCKLA WATER SYSTEM, INC.					
Principal Place of Business %CHUMUCKLA WATER SYSTEMS, INC. 3007 APACHE DRIVE PACE, FL 32571 US			Mailing Address %CHUMUCKLA WATER SYSTEMS, INC. 3007 APACHE DRIVE PACE, FL 32571 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Country		4. FEI Number 59-1265550	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		Applied For Not Applicable			
6. Name and Address of Current Registered Agent BRAY, GEORGE HENRY 3900 WILLARD NORRIS RD MILTON, FL 32571			7. Name and Address of New Registered Agent Name Ronald Kilpatrick Street Address (P.O. Box Number is Not Acceptable) 6447 Chumuckla Hwy City Pace FL Zip Code 32571		
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE Ronald Kilpatrick, President <small>Signature, typed or printed name of registered agent and title if applicable.</small>				DATE March 15, 2007	
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE P NAME BRAY, GEORGE H STREET ADDRESS 3900 WILLARD NORRIS RD CITY-ST-ZIP PACE, FL 32571	<input checked="" type="checkbox"/> Delete		TITLE Director NAME Bray, George H STREET ADDRESS 3900 Willard Norris Rd CITY-ST-ZIP Pace, Florida 32571	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE VP NAME HATFIELD, DOUG STREET ADDRESS 2311 HWY 182 CITY-ST-ZIP JAY, FL 32565	<input type="checkbox"/> Delete		TITLE President NAME Kilpatrick, Ronald STREET ADDRESS 6447 Chumuckla Hwy CITY-ST-ZIP Pace, Florida 32571	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE D NAME KIMBROUGH, BILLY M STREET ADDRESS 8846 CHUMUCKLA WAY CITY-ST-ZIP PACE, FL 32571	<input type="checkbox"/> Delete		TITLE President NAME Kilpatrick, Ronald STREET ADDRESS 6447 Chumuckla Hwy CITY-ST-ZIP Pace, Florida 32571	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE D NAME HENDERSON, BRYAN STREET ADDRESS 3578 HWY LOWERY RD CITY-ST-ZIP PACE, FL 32571	<input type="checkbox"/> Delete		TITLE President NAME Kilpatrick, Ronald STREET ADDRESS 6447 Chumuckla Hwy CITY-ST-ZIP Pace, Florida 32571	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE D NAME CAMPBELL, COLBERT STREET ADDRESS 6035 QUINTETTE RD CITY-ST-ZIP MILTON, FL 32571	<input type="checkbox"/> Delete		TITLE President NAME Kilpatrick, Ronald STREET ADDRESS 6447 Chumuckla Hwy CITY-ST-ZIP Pace, Florida 32571	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE S NAME FLEMING, RANDY STREET ADDRESS 3029 DAYBREAK LANE CITY-ST-ZIP PACE, FL 32571	<input type="checkbox"/> Delete		TITLE President NAME Kilpatrick, Ronald STREET ADDRESS 6447 Chumuckla Hwy CITY-ST-ZIP Pace, Florida 32571	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.					
SIGNATURE: Ronald Kilpatrick, President <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				Date 3-15-07	
Daytime Phone # 850-994-3001					