

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 01 1996 8:00 am
Secretary of State

DOCUMENT # 715049 (3)

1. Corporation Name

POINT BAKER WATER SYSTEM, INC.



Principal Place of Business

6857 HIGHWAY 89
MILTON FL 32570

Mailing Address

6857 HIGHWAY 89
MILTON FL 32570

3. Date Incorporated or Qualified
08/01/1968

3a. Date of Last Report
01/26/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-1296743

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

LARRY WHITE & ASSOC INS OF MILTON
204 ESCAMBIA ST
MILTON FL 32570

81 Name

82 Street Address (P.O. Box Number Is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE
NAME WARD, JOEL
STREET ADDRESS 5325 HWY 182
CITY-ST-ZIP JAY FL

1.1 TITLE D ☐ Change ☒ Addition
1.2 NAME Beasley, Willard
1.3 STREET ADDRESS 590 Elendiea Lane
1.4 CITY-ST-ZIP Milton, Florida 32570

TITLE ~~ST~~ ☒ DELETE
NAME ~~SAMUEL, JERRY~~
STREET ADDRESS ~~6425 STEAMBOAT ST.~~
CITY-ST-ZIP ~~MILTON FL~~

2.1 TITLE Sec/Treasurer ☐ Change ☒ Addition
2.2 NAME Jerry H. Womack
2.3 STREET ADDRESS 6524 Bass Lane
2.4 CITY-ST-ZIP Milton, Florida 32570

TITLE ~~D~~ ☐ DELETE
NAME SPICER, ERNIE
STREET ADDRESS 6257 ROBIN HOOD RD.
CITY-ST-ZIP MILTON FL

3.1 TITLE Vice President ☒ Change ☐ Addition
3.2 NAME Spicer, Ernie
3.3 STREET ADDRESS 6257 Robin Hood Rd.
3.4 CITY-ST-ZIP Milton, Florida 32570

TITLE ~~DR~~ ☐ DELETE
NAME DRIGGERS, JERRY
STREET ADDRESS 6404 SPRUCE ST.
CITY-ST-ZIP MILTON FL

4.1 TITLE President ☒ Change ☐ Addition
4.2 NAME Jerry Driggers
4.3 STREET ADDRESS 6404 Spruce St.
4.4 CITY-ST-ZIP Milton, Florida 32570

TITLE ~~DR~~ ☐ DELETE
NAME ~~ROWELL, EDWARD~~
STREET ADDRESS ~~7350 HIGHWAY 89~~
CITY-ST-ZIP ~~MILTON FL~~

5.1 TITLE ☐ Change ☒ Addition
5.2 NAME D
5.3 STREET ADDRESS Lincoln, Dwight
5.4 CITY-ST-ZIP 6264 Jay's Way
Milton, Florida 32570

TITLE D ☐ DELETE
NAME STEWART, JAMES P.
STREET ADDRESS P. O. BOX 764
CITY-ST-ZIP MILTON FL

6.1 TITLE ☐ Change ☒ Addition
6.2 NAME D
6.3 STREET ADDRESS Cutts, James
6.4 CITY-ST-ZIP 6237 Willard Norris Rd.
Milton, Florida 32570

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: *Jerry Womack* Jerry Womack, Sec/Treas 1/18/96 904-626-2773

CR2E037 (12/95)