2-19-97 B-2006 MC FILE NOW: FILING FEE IS \$61.25

NONPROFIL CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

715049

(3)

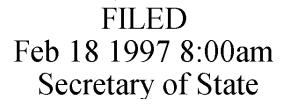
POINT BAKER WATER SYSTEM, INC.

Principal Place of Business

Mailing Address

6857 HIGHWAY 89 MILTON FL 32570

6857 HIGHWAY 89 MILTON FL 32570-9531





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				3. Date incorporated or Qualified 3a. Date of Last Report 08/01/1968 02/01/1996	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number Applied	1 For
21		26		En_4000749	olicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional Fee Required	
City & State	е	City & State		6. Election Campaign Financing \$5.00 May	
23		28		Trust Fund Contribution Added to Fe	
Zip	Country	Zip	Country	8. This corporation has liability for intangible tax under s. 199	
24	25	29 3	0	Florida Statutes	,
	9. Name and Address of Curren	t Registered Agent		10. Name and Address of New Registered Agent	
			81 Name		
LARRY WHITE & ASSOC INS OF MILTON			82 Street	Address (P.O. Box Number is Not Acceptable)	
204 ESCAMBIA ST					l
MILTON	FL 32570		83	,	
			84 City	85 Zip Code	
- •			Oily	FL 85 Zip Code	' l
11. Pursuant	to the provisions of Sections 617.050	2 and 617.1508, Florida Statutes	the above-named	corporation submits this statement for the purpose of changing its regionation's board of directors. I hereby accept the appointment as regis	istered
agent I a	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was aut itions of, Section 617,0503. Florid	thorized by the corp da Statutes.	poration's board of directors. I hereby accept the appointment as regis	stered
SIGNATURE	,	, ., .,			ŀ
OIGHATORE .	Signature, typed or printed name of registered ager	nt and title if applicable [NOTE: F	Registered Agent signature	required when reinstating) DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	12
TITLE	D	DELETE	1.1 TITLE		Addition
NAME	WARD, JOEL		1.2 NAME	Lincoln, Dwight 6264 Jay's Way Milton, Florida 32570	1
STREET ADDRESS	5325 HWY 182		1.3 STREET ADDRESS	6264 Jay's Way	
CITY - ST - ZIP	JAY FL		1.4 CITY-ST-ZIP	Milton, Florida 32570	
TITLE	ST	DELETE	2.1 TITLE	D. Change	Addition
NAME	WOMACK, JERRY H.		2.2 NAME	Čutts. James	
STREET ADDRESS	6524 BASS LANE		2.3 STREET ADDRESS	Cutts. James 6237 Willard Norris Rd.	
CITY-ST-ZIP	MILTON FL.		2. 4 CITY-ST-ZIP	Milton, Florida 32570	
TITLE	VP .	DELETE	3.1 TITLE		Addition
NAME	SPICER, ERNIE		3.2 NAME	Rowell. Edward	
STREET ADDRESS	6257 ROBIN HOOD RD.		3.3 STREET ADDRESS	420 Oakland Dr	
CITY-ST-ZIP	MILTON FL		3.4. CITY-ST-ZIP	420 Oakland Dr. Milton, Florida 32570	
TITLE	P	☐ DELETE	4.1 TITLE	Change	Addition
NAME	DRIGGERS, JERRY		4. 2 NAME	•	
STREET ADDRESS	6404 SPRUCE ST.		4.3 STREET ADDRESS		1
CITY-ST-ZIP	MILTON FL		4.4 CITY-ST-ZIP		J
TITLE	D	☐ DELETE	5.1 TITLE	☐ Change ☐	Addition
NAME	BEASLEY, WILLARD		5.2 NAME		- 1
STREET ADDRESS	590 ELENDIEA LANE		5.3 STREET ADDRESS	•	1
CITY-ST-ZIP	MILTON FL		5.4 CITY-ST-ZIP		1
TITLE	D	DELETE	6.1 TITLE	Change 🗖	Addition
NAME	STEWART, JAMES P.		6.2 NAME		
STREET ADDRESS	P. O. BOX 764		6.3 STREET ADDRESS		
CITY-ST-ZIP	MILTON FL				
OILL-91-TIL	MILIVITE		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 eath; 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. (904-626-2773

SIGNATURE:

Jerry Womack, Sec/Treas 1/9/97