


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2008 08:00 AM
Secretary of State

DOCUMENT # 716460 1. Entity Name AUBURN WATER SYSTEM, INC.	
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Principal Place of Business 3097 LOCKE LANE CRESTVIEW, FL 32536	Mailing Address 3097 LOCKE LANE CRESTVIEW, FL 32536
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01112008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1368568	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent CADENHEAD, DONALD 3236 TWILIGHT DR CRESTVIEW, FL 32539	DO NOT WRITE IN THIS SPACE
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KEARLEY, JOSEPH M 3023 ADAMS RD CRESTVIEW, FL 32536
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WOOD, DWAIN 207 WHEELER PL CRESTVIEW, FL 32539
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PETERSON, CEDRIC 3567 BUCKHORN DR CRESTVIEW, FL 32539
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CADENHEAD, DONALD 3236 TWILIGHT DR CRESTVIEW, FL 32539
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RANKIN, MARY 5871 WILLOW LN CRESTVIEW, FL 32539
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SMITH, BRENDA 6145 TANSY LANE CRESTVIEW, FL 32539

000000789382
01/22/08-80024-002 61.25

DO NOT WRITE IN THIS SPACE

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: Donald L. Cadenhead - President 1/15/08 850 682-3413
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
Donald L. Cadenhead