

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Mar 13, 2009  
Secretary of State**

DOCUMENT# 718237

Entity Name: EL JOBEAN WATER ASSOCIATION, INC.

**Current Principal Place of Business:**

14410 PAMBAR RD  
P.O.BOX 27149  
EL JOBEAN, FL 33927 US

**New Principal Place of Business:**

14410 PAMBAR RD  
PORT CHARLOTTE, FL 33953 US

**Current Mailing Address:**

P.O. BOX 27149  
P.O.BOX 27149  
EL JOBEAN, FL 33927 US

**New Mailing Address:**

P.O. BOX 27149  
EL JOBEAN, FL 33927 US

FEI Number: 59-1459468      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

EDWARDS, MARY L  
3587 GILLOT BLVD  
PT CHARLOTTE, FL 33981 US

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: ST ( ) Delete  
Name: LETHEICQ, FRANCES  
Address: 4234 OAK TERRACE CR.  
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: VP ( ) Delete  
Name: PIERSON, DAVID  
Address: 3895 BRAVO  
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: P ( ) Delete  
Name: SHROUT, RIP  
Address: 14444 NEWCOMB RD  
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: D ( ) Delete  
Name: HUGHES, DONALD  
Address: 4163 HOLLINS  
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: D ( ) Delete  
Name: SMITH, THAD  
Address: 3453 GAINSBORO  
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: HUGHES, DONALD  
Address: 4163 HOLLIS  
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: D (X) Change ( ) Addition  
Name: ESPOSITO, FRANK  
Address: 3688 STOCKTON RD  
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: D ( ) Change (X) Addition  
Name: ALBRITTON, LARRY  
Address: 4187 HOLLIS AVE  
City-St-Zip: PORT CHARLOTTE, FL 33953

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RIP SHROUT

P

03/13/2009

Electronic Signature of Signing Officer or Director

Date