

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 718403

FILED
Jan 03, 2011
Secretary of State

Entity Name: MILLIGAN WATER SYSTEM, INC.

Current Principal Place of Business:

5340 HWY 4
BAKER, FL 32531 US

New Principal Place of Business:

Current Mailing Address:

5340 HWY 4
BAKER, FL 32531 US

New Mailing Address:

FEI Number: 59-1363943

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELLIS, MARTIN W PRES
5422 LUNNIE BARNES RD.
BAKER, FL 32531 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: VD
Name: KELLEY, ALLEN E SR VP
Address: 5224 HWY 4
City-St-Zip: BAKER, FL 32531 US

Title: VD
Name: EVERETT, WILLIAM E JR VP
Address: 5727 BUCK WARD RD
City-St-Zip: BAKER, FL 32531 US

Title: ST
Name: THARP, LISA E SEC/TR
Address: 1540 N. LLOYD STREET
City-St-Zip: CRESTVIEW, FL 32536 US

Title: D
Name: FOUNTAIN, WELDON
Address: 5466 LUNNIE BARNES RD
City-St-Zip: BAKER, FL 32531 US

Title: D
Name: JORDAN, TERESA
Address: 1609 EUNICE LN
City-St-Zip: BAKER, FL 32531 US

Title: D
Name: QUATTLEBAUM, JOE
Address: 5197 RAY ST
City-St-Zip: BAKER, FL 32531 US

I hereby 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 all other like empowered.

SIGNATURE: LISA E. THARP

ST

01/03/2011

Electronic Signature of Signing Officer or Director

Date