

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2006 8:00 am
Secretary of State

03-03-2006 90095 005 ****70.00

DOCUMENT # 722048 1. Entity Name BAGDAD-GARCON POINT WATER SYSTEM, INC.					
Principal Place of Business 6368 DALISA ROAD MILTON, FL 32583			Mailing Address 6368 DALISA ROAD MILTON, FL 32583		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Zip Country		City & State Zip Country		4. FEI Number 59-1421159 <div style="float: right;"> <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable </div>	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required				02232006 Chg-NP CR2E037 (11/05)	
6. Name and Address of Current Registered Agent REYNOLDS, PETER H 5119 AVENIDA DEL FUEGO MILTON, FL 32571			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PRICE, WILLIAM R P.O. BOX 294 BAGDAD, FL 32530 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD LEWIS, STEPHEN 6672 ROCKY SHORES ROAD MILTON, FL 32583 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	LEWIS II, M. STEPHEN <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD GILLIS, DOUG 4244 LANCASTER GATE ROAD PACE, FL 32571 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D O'NEAL, BOBBY 3102 DEEP WATER COVE MILTON, FL 32583 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	O'NEIL, BOBBY <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BOLES, F.D. P.O. BOX 244 BAGDAD, FL 32530 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROXSON, KEN 6305 SARAGON LANE MILTON, FL 32583 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
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 empowers.					
SIGNATURE: <u>M. Stephen Lewis II</u> M. Stephen Lewis II 2/22/06 850-623-8508 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

ATTACHMENT #722048

Bagdad - Garcon Point Water System, Inc.

6368 DaLisa Road
Milton, Florida 32583-7635
Phone: (850) 623-8508 FAX: (850) 623-5039

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Board of Directors

WILLIAM R. PRICE
President

DOUG GILLIS
Vice-President

M. STEPHEN LEWIS
Secretary - Treasurer

F. D. BOLES
Director

KEN BROXSON
Director

ROD FINCH
Director

BOBBY O'NEIL
Director

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	D	TITLE	
NAME	FINCH, ROD	NAME	
STREET ADDRESS	5718 TROUT BAYOU CIRCLE	STREET ADDRESS	
CITY - ST - ZIP	MILTON, FL 32583	CITY - ST - ZIP	



MEMBER FLORIDA RURAL WATER ASSOCIATION