SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998, AMOUNT DUE ON OR SEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

SIGNATURE

FILED NONPROFIT FLORIDA DEPARTMENT OF STATE Jul 30 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # 723683 (9) ROSEDALE WATER ASSOCIATION, INC. Principal Place of Business Malling Address HARDAWAY HWY. 268 ROSEDALE RT. 1 BOX 521 HARDAWAY HWY. 268 ROSEDALE RT. 1 BOX 521 3. Date incorporated or Qualified CHATTAHOCHEE FL 32324 CHATTAHOCHEE FL 32324 06/15/1972 FEI Number Applied For 59-2873128 Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired 26 Fee Required Suite, Apt. #. etc. Suite, Apt. #, etc. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 22 27 Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? Yes No 23 28 Zip Country This corporation owes or has paid the current year Intangible 24 30 25 29 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name LEWIS, ROBERT Street Address (P.O. Box Number is Not Acceptable) 82 HARDAWAY HWY. 268 ROSEDALE RT. 1 BOX 521 83 CHATTAHOCHEE FL 32324 84 City 85 Zip Code 11. Pursuant to the provisions of sections 617.0502 and 617.1508, Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fiorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 617.0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (2/38) 13. TITLE DELETE 1.1 TITLE Change Addition NAME ETHRIDGE, JAMES E 1.2 NAME STREET ADDRESS RT 1 BOX 556 1.3 STREET ADDRESS CHATTAHOOCHEE FL 32324 CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE 2.1 TITLE DELETE Change Addition DAWKINS, NORRIS NAME 2.2 NAME STREET ADDRESS 303 AFRICA ST 2,3 STREET ADDRESS CHATTAHOOCHEE FL 32324 CITY-ST-ZIP 2.4 CiTY-ST-ZIP TITLE 3.1 TITLE DELETE Change Addition NAME HOWARD, ALMA 3.2 NAME RT. 1 BONNIE HILL STREET ADDRESS 3.3 STREET ADORESS CHATTAHOOCHEE FL CITY-ST-ZIP 3.4 CITY-ST-ZIP TITLE 4.1 TITLE DELETE Change Addition WILLIAMS, EDGAR NAME 4.2 NAME RT. 1 HWY. 269 A STREET ADDRESS 4.3 STREET ADDRESS CHATTAHOOCHEE FL 32324 CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE 5.1 TITLE DELETE Change Addition JÁCKSON, JIMMY NAME 52 NAME RT. 1 BOX 14 GREENSBORD HWY. STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP **OHATTAHOOCHEE FL 32324** 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition NAME WILLIAMS, MABLE **B2NAME** RT, 1 BONNIE HILL GREENSBORD HWY. STREET ADDRESS 6.3 STREET ADDRESS CHATTAHOOCHEE FL CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. I 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 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 12 or Block 13 if or on an attachment with an address.