

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 12, 2008 8:00 am
Secretary of State

03-12-2008 90026 046 ****61.25

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1. Entity Name

SOUTH DUNNELTON WATER ASSOCIATION, INC.



Principal Place of Business

1910 TEST CT
DUNNELTON FL 34434
US

Mailing Address

PO BOX 608
DUNNELTON FL 34430-0608
US



2. Principal Place of Business - No P.O. Box #

1910 TEST CT
Suite, Apt. #, etc.

3. Mailing Address

PO BOX 608
Suite, Apt. #, etc.

1st MOORE

CR2E037 (10/07)

City & State

Dunnellon FL

City & State

Dunnellon FL

4. FEI Number

59-3602999

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MCLENDON, ZOE G
1529 J WILLIAMS LANE
DUNNELTON FL 34431

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

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature is required when re-registering)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE VD ☐ Delete
NAME CHESTEEN, LARRY
STREET ADDRESS 12452 N LEFANT TERR
CITY-ST-ZIP DUNNELTON FL 34434

TITLE TD ☐ Delete
NAME MCLENDON, ZOE GAIL
STREET ADDRESS 1529 J WILLIAMS LANE
CITY-ST-ZIP DUNNELTON FL 34431

TITLE SD ☐ Delete
NAME THOMAS, DENNIS
STREET ADDRESS 12490 N WATER WAY
CITY-ST-ZIP DUNNELTON FL 34433

TITLE D ☐ Delete
NAME FERNANDEZ, LINDA
STREET ADDRESS VILLA #2 WATERWAY
CITY-ST-ZIP DUNNELTON FL 34433

TITLE D ☒ Delete
NAME WISE, CECIL
STREET ADDRESS 1559 DUPAGE TR
CITY-ST-ZIP DUNNELTON FL 34434

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☒ Addition
NAME Mrs Amie mells
STREET ADDRESS 1698 NAT Turner LN
CITY-ST-ZIP Dunnellon FL 34434

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 live empowered.

SIGNATURE:

zoe gail mclendon

President

3/3/08