


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 09, 2008 8:00 am**  
**Secretary of State**

07-09-2008 90019 042 \*\*\*\*61.25

<b>DOCUMENT # 790885</b>	
1. Entity Name <b>FLORIDA MAID DRAINAGE AND IRRIGATION ASSOCIATION</b>	

Principal Place of Business <b>2627 S. JENKINS ROAD FORT PIERCE, FL 34981 US</b>	Mailing Address <b>2627 S JENKINS RD FORT PIERCE, FL 34981 US</b>
---	--

**40109837**



2. Principal Place of Business - No P.O. Box # <b>3150 Cardinal Drive</b>	3. Mailing Address <b>3150 Cardinal Drive</b>
Suite, Apt. #, etc.	Suite, Apt. #, etc.

01162008 Chg-NP CR2E037 (12/06)

City & State <b>Vero Beach, FL</b>	City & State <b>Vero Beach, FL</b>
---------------------------------------	---------------------------------------

4. FEI Number <b>23-7152929</b>	Applied For <input type="checkbox"/> Not Applicable
------------------------------------	--

Zip <b>32963</b>	Country	Zip <b>32963</b>	Country
---------------------	---------	---------------------	---------

5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
---	---------------------------------------

6. Name and Address of Current Registered Agent <b>CUSSON, JEFFREY L 736 36TH AVE. VERO BEACH, FL 32968</b>	
--	--

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
<b>FL</b>	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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>Filing Fee is \$61.25 Due by May 1, 2008</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>	<b>Make check payable to Florida Department of State</b>
---	---	--	--

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
<b>D CUSSON, JEFFREY L. 736 36TH AVE VERO BEACH, FL 32968</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
<b>DT BEASLEY, WALTER G 2627 S. JENKINS ROAD FORT PIERCE, FL 34981</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
<b>PD BORLAND, RICHARD 2627 S. JENKINS ROAD FORT PIERCE, FL 34981</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
<b>D DUGGER, GERALD 2627 S. JENKINS ROAD FORT PIERCE, FL 34981</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
<b>D MCDOWELL, CURT 27200 N.E. 40TH AVE. OKEECHOBEE, FL 34972</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>DT Beasley, Walter G. 3150 Cardinal Drive Vero Beach, FL 32963</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
<b>PD Borland, Richard 3150 Cardinal Drive Vero Beach, FL 32963</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
<b>D Dugger, Gerald 3150 Cardinal Drive Vero Beach, FL 32963</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input 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 empowered.

**SIGNATURE:** Walter G. Beasley **4-25-08** **(772) 234-5234**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #



# ATTACHMENT

## FLORIDA MAID DRAINAGE & IRRIGATION ASSOCIATION

40109837

July 7, 2008

Florida Department of State  
Division of Corporations  
PO Box 1500  
Tallahassee, FL 32302-1500

Re: Document #790885

To All Concerned:

Please find attached copies of the 2008 Annual Report dated April 25, 2008 and a copy of the original check #1210 that was mailed with the report. It is apparent that the check has been lost. As of today, July 7<sup>th</sup>, our bank does not show that the check has cleared.

I have included a new check in the amount of \$61.25. Please do not hesitate to contact me, if there are any further problems with this report.

Sincerely,

*Cindy Williams*

Cindy Williams  
Staff Accountant/Accts. Payable



ATTACHMENT

110109837

FLORIDA MAID DRAINAGE & IRRIGATION ASSOC

3150 CARDINAL DR  
VERO BEACH FL 32963

1210

DATE April 24, 2008

63-615/670  
18

PAY  
TO THE  
ORDER OF

Florida Department of State

\$ 61.25

Sixty - One and 25/100

DOLLARS

Security features  
are included.  
DMMB on back.



**Seacoast**  
NATIONAL BANK

VERO BEACH, FLORIDA 32963

FOR Doc # 790885 - Annual Rept

MSB