

**FILE ON OR BEFORE APRIL 7, 1999 TO AVOID
REVOCATION AND \$500 PENALTY FEE**

**LIMITED PARTNERSHIP
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

99 MAR -4 PM 3: 37

SECRETARY OF STATE



1. Name of Limited Partnership
1a. DOCUMENT #
A97000001783

WPC INDUSTRIAL CONTRACTORS, LTD.

Mailing Address 11651 PHILLIPS HIGHWAY JACKSONVILLE FL 32256	Principal Office Address 11651 PHILLIPS HIGHWAY JACKSONVILLE FL 32256
2. Mailing Address	2a. Principal Office Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip Country	Zip Country

3. Date Formed or Registered
08/19/1997

3a. Date of Last Report
01/02/1998

4. State or Country of Formation
FL

5a. Capital Contributions as Shown on record
\$5,100,000.00

5b. Amount of Capital Contributions in FLORIDA to date

6. FEI Number
59-3463861 Applied For Not Applicable

7. Certificate of Status Desired **\$8.75 Additional Fee Required**

8. Make check payable to Dept. of State (See reverse side for fee information)

9. Name and Address of Current Registered Agent

~~BELLOIT, JOHN G~~
11651 PHILLIPS HIGHWAY
JACKSONVILLE FL 32256

10. If changed, new Registered Agent/Office

Name: **Jonathan Belloit**

Street Address (P.O. Box Number is Not Acceptable):
11651 Phillips Hwy

Suite, Apt #, etc.

City: **Jacksonville** FL Zip Code: **32256**

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment) *Jonathan Belloit* DATE **2/15/99**

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

11. Name(s) of General Partner(s) WATER PROCESSING COMPANY	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 11651 PHILLIPS HIGHWA	11b. City, State & Zip Code JACKSONVILLE FL 32256	11c. Registration/ Document Number 430851
<p>300002903513-- 4 -03/12/99--01002--024 ****535.00 ****535.00</p> <p><i>sc 3-10-99</i></p>			

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE *Jonathan Belloit* DATE **2/15/99**

Typed or Printed Name of General Partner Signing Form: **Jonathan Belloit** Daytime Telephone Number: **(904)268-0099**

CR2E003 (12/98)