

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 22, 2007 8:00 am**  
**Secretary of State**

02-22-2007 90021 001 \*\*\*150.00

**DOCUMENT # F58146**

1. Entity Name  
**THE WATER SPIGOT, INC.**



Principal Place of Business  
**5806 EAST HWY, 22  
PANAMA CITY, FL 32404**

Mailing Address  
**5806 EAST HWY, 22  
PANAMA CITY, FL 32404**

**60018000**



02122007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-2031202**

Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

**JACKSON, PATRICIA S.  
314 FAIRWAY BLVD.  
PANAMA CITY BEACH, FL 32407**

**DO NOT WRITE  
IN THIS SPACE**

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 required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	JACKSON, PATRICIA S.
STREET ADDRESS	314 FAIRWAY BLVD.
CITY - ST - ZIP	PANAMA CITY BCH, FL
TITLE	SVT
NAME	MILLER, JASON W
STREET ADDRESS	<del>314 FAIRWAY BLVD</del> 7125 N. Lagoon Dr. Unit 7
CITY - ST - ZIP	PANAMA CITY BEACH, FL 32407
TITLE	Shadetree Condos
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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 607, 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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**2-13-07**

Date

**850-871-1900**

Daytime Phone #