FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
96 SEP 10 AM 11:09
SECRETARY OF STATE

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****225.00 ****225.00

DOCUMENT # F95000001486 (8)

1. Corporation Name
INTEGRATED CLEAN WATER, INC.

Principal Place of Business
25 VILLAGE WAY
PALM HARBOR FL 34683

Mailing Address
25 VILLAGE WAY
PALM HARBOR FL 34683

3. Date Incorporated or Qualified: **03/28/1995**
3a. Date of Last Report:

2. Principal Place of Business
21: 9307 SW 19th Ave
Suite, Apt. #, etc.
22:
City & State
23: Gainesville, FL
Zip
24: 32607
Country
25: America

2a. Mailing Address
26: 9307 SW 19th Ave
Suite, Apt. # etc.
27:
City & State
28: Gainesville, FL
Zip
29: 32607
Country
30: America

4. FEI Number: **59-2749556** ☐ Applied For ☐ Not Applicable

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

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1311 EXECUTIVE CENTER DRIVE, SUITE 200
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name: W. Heavener
82 Street Address (P.O. Box Number is Not Acceptable): 9307 SW 19th Ave
83:
84 City: Gainesville, FL **FL** 85 Zip Code: 32607

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida 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 Florida. 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 607.0505, Florida Statutes.

SIGNATURE: William Heavener Pres 9/5/96
Signature, type or printed name of registered agent and title if applicable (N.B. Registered Agent Signature required where noted) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP HEAVENER, WILLIAM B 25 VILLAGE WAY PALM HARBOR FL 34683	☑ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	DP Heavener, William D 9307 SW 19th Ave Gainesville, FL 32607	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST HEAVENER, PATRICIA ANN 25 VILLAGE WAY PALM HARBOR FL 34683	☑ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	ST Heavener, Patricia Ann 9307 SW 19th Ave Gainesville, FL 32607	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

9/20/96

14. 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: William Heavener 9/5/96 352-335-0900
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone Number

CR2E034 (12/95)