

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 16, 2005 8:00 am
Secretary of State

07-11-2005 90125 049 ***150.00
08-16-2005 90038 050 ***400.00

DOCUMENT # F95000006048			
1. Entity Name CAPITAL WATER SOFTENERS OF FLORIDA, INC.			
Principal Place of Business 2106 SW HAYWORTH PORT ST LUCIE, FL 34953 US		Mailing Address 2106 SW HAYWORTH PORT ST LUCIE, FL 34953 US	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent ANDERSON, WAYNE 5582 BERMUDO DUNNS CIR LAKE WORTH, FL 33463		7. Name and Address of New Registered Agent Name Tani E. Mauer Street Address (P.O. Box Number is Not Acceptable) 500 N.E. Spanish River Blvd Suite 27 City Boca Raton FL Zip Code 33431	
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 <u><i>Tani E. Mauer</i></u> (NOTE: Registered Agent signature required when reissuing) DATE <u>7/7/05</u>			
FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P ANDERSON, GAIL 5582 BERMUDO DUNNS CIR LAKE WORTH, FL 33463	TITLE NAME STREET ADDRESS CITY - ST - ZIP	PITD Anderson Gail 5582 Bermuda Dunes Circle Lake Worth, FL 33463
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP ANDERSON, WAYNE 5582 BERNUDO DUNNS CIR LAKE WORTH, FL 33463	TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP Anderson Dennis W. JR 5582 Bermuda Dunes Circle Lake Worth, FL 33463
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <u><i>Dennis Wayne Anderson Jr</i></u>		561 265-2380	

Stuart, FL 34994 /

50061751



07072005 Chg-P CR2E034 (10/03)

4. FEI Number
65-0599211 Applied For
Not Applicable

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

7/7/05