SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9700001659 (8)

## FILED Jul 21 1998 8:00am Secretary of State

AMERIC	AN AQUA RESOURCES, INC	, , , , , , , , , , , , , , , , , , ,			######################################
Principal Plac	e of Business	Malling Address			DOING BEILL ABLUS 11610 91181 SINTO LON 1691
RT. 3. BOX 304 LAKESHORE DR. RT. 3.		RT. 3. BOX 304 LAKESHOF JACKSON MS 39213	re dr.	DO NOT WRITE	E IN THIS SPACE
				3. Date Incorporated or Qualified	IN THIS SPACE
				04/02/1997	
	Place of Business 875 Indrio Rd.	2a. Mailing Address	- 0	4. FEt Number	Applied For
21 / Sulte, Apt.			ndrio Road	64-0816577	
22		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat <b>F</b> +.	Pierce, Florida	City & State  28 Ft. Pierce	Florida	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24 34 9.	51 25 U.S.A	Zip 34 95 1	Country 30 USA	This corporation owes or has pail     Personal Property Tax due June	
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Re	gistered Agent
	ris, <b>r</b> . Wesley		81 Name		
	75 IN <mark>O</mark> RIO RD.		82 Street Ad	ddress (P.O. Box Number Is Not Acceptable	le)
FT. F	PIERÖE FL 34951				
			83		·
<b>'</b>			84 City		FI 85 Zip Code
			1 1 1		
11. Pursuant	t to the provisions of sections 607.0502	and 607.1508, Florida Statute	s, the above-named cor	poration submits this statement for the purp	pose of changing its registered
office or	registered agent, or both, in the State of	of Florida. Such change was a	uthorized by the corpor	poration submits this statement for the purpation's board of directors. I hereby accept	pose of changing its registered
office or agent. I a	t to the provisions of sections 607,0502 registered agent, or both, in the State of am familiar with, and accept the obligat	of Florida. Such change was a	uthorized by the corpor	poration submits this statement for the purp ation's board of directors. I hereby accept t	pose of changing its registered
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office or agent. I a SIGNATURE  12.  1itle  NAME  STREET ADDRESS  CITY-ST-ZIP	registered agent, or both, in the State of am familiar with, and accept the obligated agent.  Signature, typed or printed name of registered agent.  OFFICERS AND CP  HARRIS, R. WESLEY  11875 INDRIO RD.  FT. PIERCE FL 34951	of Florida. Such change was a titons of, section 607.0505, Flo	orte Registered Agent signature  13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	ation's board of directors. I hereby accept in required when reinstaling)  ADDITIONS/CHANGES TO OFFI  Billy Walker 1393 Flowering Dogwood Dyers burg, TN, 380	DATE  CERS AND DIRECTORS IN 12  Change X Addition  Lane Suite B
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I. 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 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.

CIONATURE.

Pro Part Hamil Courses W. Harris

1-15-40

601- 932-4940