## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9700005984 (6)

WATER KING, INC.

**FILED** Feb 24 1998 8:00am Secretary of State



		.,					
Principal Place of Business Mailing Address					) saunet nie iniel iaun atuli Afli	(1 MA111 AD111 AB181 MITTE 161	W) 18411 B181 4841
1450 KASTNER PLACE. STE 100-B 1450 KASTNER PLACE			E. STE 100-B				
SANFORD FL 32771		SANFORD FL 32771			DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifie		
					11/12/1997		
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26	26		06-1483300		Not Applicable
Suite, Apt. #, etc		Suite, Apt. #, etc.		5. Certificate of Status Desired	1 1 7 7	5 Additional	
22		27			Gr Commodic of Glarco Decired	Fee	Required
City & State		City & State	<u></u> †₁ ′		6. Election Campaign Financing		00 May Be
Zip Country		Z(p) Country		Trust Fund Contribution		led to Fees	
24	25 29 30			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No			
	9. Name and Address of Curre		1001		10. Name and Address of New	·	
FLC	ORIDA CORPORATE SUPPORT	. INC.	81	Name			
	E. ROBINSON ST., STE 500		82	Street Add	ress (P.O. Box Number is Not Accer	table)	
OR	LANDO FL 32801			Olifect Add	TOSS (1:0: DOX NOT		
1			83			<del></del>	
}			84	City		85 Z	Zip Code
				1 '		FL	·
11. Pursuant to	o the provisions of Sections 607.0f	502 and 607.1508, Florida State of Florida State	atules, the above	e-named corp	poration submits this statement for the	e purpose of changing	ng its registered
agent lar	n familiar with, and accept the obli	gations of, Section 607 0505	, Florida Statute	s.	ment board of directors. Thereby de	ооргана арронилия	ao rogistores
SIGNATURE	<del></del>				·		
12.	Signature, typed or pooled use color referred a OFFICERS AT	gentand the diappt cable (	NOTE Ringistered Ag	ent signature requi	red when reinstating)  ADDITIONS/CHANGES TO OF	DATE EICERS AND DIREC	TORS IN 12
TITLE	P	DELETE	1111111		7,001110110,011/111020 10 01	☐ Char	
NAME	BEAUMONT, JOHN G		1.2 NAME			_	· -
STREET ADDRESS	1450 KASTNER PLACE, STE	E 100-B	1.3 STREE	1 ADDRESS			13
CITY-ST-ZIP	SANFORD FL		1.4 CITY -				}
TETLE	VCD DELETE		2.1 TITLE			Char	ige Addition
NAME	CREWE-READ, CHRISTOPH		2.2 NAME				1
STREET ADDRESS	1450 KASTNER PLACE, STE	E 100-B	2.3 STREE	t address			ļ
CITY-ST-ZIP	SANFORD FL		2. 4 CITY-	ST-ZIP			
TITLE	\$	DELETE	31 THILE			☐ Char	ige Addition
NAME	HENDRY, ROBERT R		32 NAME				
STREET ADORESS	200 E. ROBINSON STREET,	, SIE 500		T ADDRESS			
CITY-ST-ZIP	ORLANDO FL	DOUGHE	3.4. CITY-	ST-ZIP		T Obs.	do Addition
TITLE		L_ DELETE	4.1 TITLE			∐ Char	ge L Addition
NAME			4. 2 NAME				
STREET ADDRESS				T ADDRESS			
TITLE		DELETE	4.4 CITY- 5 1 TITLE	SI-ZIP	·	Char	pe Addition
NAME		WILLIE	5.2 NAME	ł		516	A. D. Wadding
STREET ADDRESS				T ADDRESS			
CITY-S1-ZIP			5.4 CITY-	1			ļ
TITLE		DELETE	6.1 TITLE	91-411		☐ Chan	ge Addition
NAME			6.2 NAME				
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP			6 4 CITY-				
	ertify that the information supplied	with this filing does not quali			Section 119.07(3)(I), Florida Statute	s. I further certify that	the information

Indicated on this annual report or supplied with first timing does not quality for the exemption stated in Section 119.07(3)(f), Florida Statutes. Further certifying the mindicated on this annual report or supplied with a first time 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 or an attachment with an address.

COPENS - READ

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