

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**Mar 02, 1999 8:00 am**  
**Secretary of State**

03-02-1999 90180 023 \*\*\*150.00

**DOCUMENT # G43295**

1. Corporation Name

**RANCH MOBILE WWTP, INC.**

Principal Place of Business

**6800 150TH AVENUE, NORTH  
CLEARWATER FL 34624-7184**

Mailing Address

**6800 150TH AVENUE, NORTH  
CLEARWATER FL 34624-7184**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**06/13/1983**

2. Principal Place of Business

**21 6800 150th Ave. N.**

2a. Mailing Address

**26 Suite, Apt. #, etc.**

**22** Suite, Apt. #, etc.

**27** Suite, Apt. #, etc.

**23** City & State

**Clearwater, FL 33764**

**28** City & State

**29** City & State

**24** Zip

**25** Country

**29** Zip

**30** Country

4. FEI Number

**59-2305969**

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 owes the current year Intangible  
Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**DAMONTE, JONATHAN JAMES  
12110 SEMINOLE BLVD.  
LARGO FL 33778**

10. Name and Address of New Registered Agent

**81** Name

**82** Street Address (P.O. Box Number is Not Acceptable)

**83**

**84** City

**FL**

**85** Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

**C**  
**COFFIN, W. S. S**  
**6800 150TH AVE. N.**  
**CLEARWATER FL**

TITLE ☐ DELETE

**VC**  
**BIRCHER, RALPH L**  
**6800 150TH AVE. N.**  
**CLEARWATER FL**

TITLE ☐ DELETE

**T**  
**CRIMMINS, BILL**  
**6800 150TH AVE. N.**  
**CLEARWATER FL**

TITLE ☒ DELETE

**S**  
**KIMBALL, MARY J**  
**6800 150TH AVE. N.**  
**CLEARWATER FL**

TITLE ☒ DELETE

**D**  
**BELL, TEENA**  
**6800 150 AVE N**  
**CLEARWATER FL**

TITLE ☐ DELETE

**D**  
**MOFFAT, JOHN**  
**6800 150 AVE N**  
**CLEARWATER FL**

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☒ Change ☐ Addition

☒ Change ☐ Addition

☒ Change ☐ Addition

☒ Change ☐ Addition

☒ Change ☐ Addition

☒ Change ☐ Addition

☒ Change ☐ Addition

☒ Change ☐ Addition

☒ Change ☐ Addition

☒ Change ☐ Addition

☒ Change ☐ Addition

☒ Change ☐ Addition

☒ Change ☐ Addition

☒ Change ☐ Addition

☒ Change ☐ Addition

☒ Change ☐ Addition

☒ Change ☐ Addition

☒ Change ☐ Addition

☒ Change ☐ Addition

☒ Change ☐ Addition

☒ Change ☐ Addition

☒ Change ☐ Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*W.S. Coffin Sr. (W.S. Coffin, Sr.)* 1/25/99 727 536 3553

CR2E034 (1/98)

0417542