

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

DOCUMENT # **G81197**

(7)

1. Corporation Name

DON'S WATER SERVICES, INC.



Principal Place of Business

Mailing Address

7641 HOOPER RD
UNIT #25
WEST PALM BEACH FL 33411
US

5829 BANANA RD
W PALM BCH FL 33413
US

2. Principal Place of Business

2a. Mailing Address

21 **2374 FLORIDA ST.**

26 **2374 FLORIDA ST.**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 **WEST PALM BCH., FL.**

28 **WEST PALM BCH., FL.**

Zip

Country

Zip

Country

24 **33406**

25 **US**

29 **33406**

30 **US**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HUTCHISON, DONALD E.
5829 BANANA RD.
W. PALM BEACH FL 33413

81 Name

MARTIN J. LONG.

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

2374 FLORIDA ST.

83

84 City

WEST PALM BCH.

FL

85 Zip Code

33406.

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

Martin J. Long

MARTIN J. LONG.

PRESIDENT

4-13-96

(Signature typed or printed name of registered agent and date of registration)

(Typed Name of Registered Agent, Signature, and Date of Registration)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PTD	<input checked="" type="checkbox"/> DELETE
NAME	HUTCHISON, DONALD E.	
STREET ADDRESS	5829 BANANA RD.	
CITY-ST-ZIP	W. PALM BEACH FL	
TITLE	VSD	<input type="checkbox"/> DELETE
NAME	LONG, MARTIN J.	
STREET ADDRESS	2374 FLORIDA ST.	
CITY-ST-ZIP	W. PALM BEACH FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PTD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	LONG, MARTIN J.	
1.3 STREET ADDRESS	2374 FLORIDA ST.	
1.4 CITY-ST-ZIP	W. PALM BCH., FL. 33406	
2.1 TITLE	VSD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	LOIS ANN LONG.	
2.3 STREET ADDRESS	2374 FLORIDA ST.	
2.4 CITY-ST-ZIP	W. PALM BCH., FL. 33406.	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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:

Martin J. Long

MARTIN J. LONG.

4-14-96

(407) 697-9219

(Signature and Typed or Printed Name of Signing Officer or Director)

(Typed Name of Officer or Director)

CR2E034 (12/95)