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Apr 29 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H44398 (6)
1. Corporation Name
METROPOLITAN WATER CONDITIONING, INC.



Principal Place of Business
6735 ANGELES RD.
MELBOURNE BEACH FL 32951

Mailing Address
6735 ANGELES RD.
MELBOURNE BEACH FL 32951-3856

3. Date Incorporated or Qualified
02/25/1985
3a. Date of Last Report
07/30/1996
4. FEI Number
59-2526544
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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24 Brevard

29 Brevard

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BALDWIN, BRENT
6735 ANGELES ROAD
MELBOURNE BEACH FL 32951

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

Brent A. Baldwin

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

(NOTE: Registered Agent's signature required when re-appointing)

DATE

4/1/97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P
NAME BALDWIN, BRENT
STREET ADDRESS 6735 ANGELES ROAD
CITY-ST-ZIP MELBOURNE BCH. FL 32951

1.1 TITLE ☐ Change ☐ Addition

TITLE VP
NAME BALDWIN, MARGOT
STREET ADDRESS 6735 ANGELES ROAD
CITY-ST-ZIP MELBOURNE BCH. FL 32951

1.2 NAME ☐ Change ☐ Addition

TITLE S
NAME LEE, SYLVIA
STREET ADDRESS 2623 PALMETTO ST., N.E.
CITY-ST-ZIP PALM BAY FL 32905

1.3 STREET ADDRESS ☐ Change ☐ Addition

TITLE T
NAME BALDWIN, JOHN
STREET ADDRESS 29312 BELMONT LAKE RD
CITY-ST-ZIP PERRYSBURG OH 43551

1.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.2 NAME ☐ Change ☐ Addition

2.3 STREET ADDRESS ☐ Change ☐ Addition

2.4 CITY-ST-ZIP ☐ Change ☐ Addition

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME ☐ Change ☐ Addition

3.3 STREET ADDRESS ☐ Change ☐ Addition

3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME ☐ Change ☐ Addition

4.3 STREET ADDRESS ☐ Change ☐ Addition

4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME ☐ Change ☐ Addition

5.3 STREET ADDRESS ☐ Change ☐ Addition

5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME ☐ Change ☐ Addition

6.3 STREET ADDRESS ☐ Change ☐ Addition

6.4 CITY-ST-ZIP ☐ Change ☐ Addition

14. I do 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.

SIGNATURE *Margot Baldwin* VP *Margot Baldwin* 4/1/97 H44398 9/1/97

CR2E034 (9/96)