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

Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90039 006 ***150.00

D	OCL	JMENT	# F	1443	398

Corporation Name

TITLE

NAME

TITLE

NAME

TITLE

NAME .

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

BALDWIN, JOHN

29312 BELMONT LAKE RD

PERRYSBURG OH 43551

METROP	POLITAN WATER CONDITION	ONING	i, INC.	_				:	
Principal Place	e of Business ·	N	failing Address				1 1999 (1818 11818 11818 11818 11818 11818 81818 11818 11818 11818 11818 11818 11818 11818 11818 11818 11818 1		
6735 ANGELES RD. MELBOURNE BEACH FL 32951 MELBOURNE BEACH FL 32951 MELBOURNE BEACH FL 32951							DO NOT WRITE IN THIS SPACE		
							3. Date Incorporated or Qualifed	7	
							02/25/1985		
3. Dringing D	lace of Business	20	. Mailing Address				4. FEI Number Applied For	1	
 	lace of business	26	,			59-2526544 Not Applicable	7		
Suite, Apt.	# etc	20	Suite, Apt. #, etc.				\$8.75 Additional	1	
	#, etc.	27]				5. Certificate of Status Desired Fee Required		
22 City & State	^	- [21]	City & State			6. Election Campaign Financing \$5.00 May Be			
1 1		28	L						
23 ———— Zip	Country	20	Zip Country			This corporation owes the current year Intangible			
24	25	29		30			Personal Property Tax.		
24	9. Name and Address of Curre			<u> </u>			10. Name and Address of New Registered Agent	7	
	3. Name and Address of Carro	iii itog.			81	Name		٦	
RALI	DWIN, BRENT							4	
	S ANGELES ROAD			ļ	82	Street Add	dress (P.O. Box Number is Not Acceptable)	- [
	BOURNE BEACH FL 32951				83			┨	
IAILE	BOOTHL BEACH I E 32301			ł	00				
				ľ	84	City	FL 85 Zip Code		
								-}	
l office or r	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the oblig	ant Flor	ida. Such change was auti	nonzea	ו עם ו	ine corporai	poration submits this statement for the purpose of changing its registered tion's board of directors. I hereby accept the appointment as registered		
SIGNATURE		4 -111			A	• -! -	red when reinstating) DATE	۱,	
	Signature, typed or printed name of registered ag			13.	Agent	signature requii	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	⊣ 8	
12.		אוט טאו	DELETE	1.1 TIT	1 F		Change Additio	의 호	
TITLE	P DAI DUNN DOENT			1.2 NA		1	_ · · · _	3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	
NAME	BALDWIN, BRENT							8	
STREET ADDRESS	_ -					ADDRESS		[
CITY-ST-ZIP	MELBOURNE BCH. FL 32951			1.4 CI		-ZIP	☐ Change ☐ Additio	귀 8	
TITLE	VP □ DELETE		2.1 TIT		1				
NAME			2.2 NA		.		j		
STREET ADDRESS	6735 ANGELES ROAD			2.3 ST	REET	ADDRESS			
CITY-ST-ZIP	MELBOURNE BCH. FL 32951			2. 4 CI	TY-S1	T-ZIP		_	
TITLE	S		☐ DELETE	3.1 111	LE .		☐ Change ☐ Additio	<u> </u>	
NAME	LEE, SYLVIA			3.2 NA	ME] -	
STREET ADDRESS	2623 PALMETTO ST., N.E.			3.3 ST	REET	ADORESS			
CITY-ST-ZIP	PALM BAY FL 32905			3.4. CI	TY-\$1	T-ZIP		_	
TITLE	Т		[7] DELETE	41 111	TLE.		☐ Change ☐ Additio	n l	

6.4 CITY-ST-ZIP CITY-ST-ZIP 14. 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, with all other like empowered.

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

□ DELETE

☐ DELETE

□ DELETE

SIGNATURE:	4	Jas	go		ale	LW	كيت كا	19
	Si	GNATURE	AND TYPE	ED OR PR	INTED NAM	ME OF SIGNI	NG OFFICER	OR DIREC

☐ Change

☐ Change

☐ Addition

Addition