

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 APR -6 AM 9:34

DOCUMENT # **H78099 (9)**

1. Corporation Name

GATOR WATER AND WASTEWATER MANAGEMENT, INC.

Principal Place of Business

6343 ROWAN ROAD
NEW PORT RICHEY FL 34653
US

Mailing Address

POST OFFICE BOX 1940
NEW PORT RICHEY FL 34656
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

09/27/1985

3a. Date of Last Report

06/20/1994

4. FEI Number

59-2615019

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$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

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CARMAN, AVERILL W.
6343 ROWAN ROAD
NEW PORT RICHEY FL 34653

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 607.0605, Florida Statutes.

SIGNATURE

Averill W. Carman, President

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

DATE

31 March 95

12. OFFICERS AND DIRECTORS

TITLE

PD

NAME

COLE, NANCY W.

STREET ADDRESS

6343 REGENCY PARK BLVD
NEW PORT RICHEY FL

CITY - ST - ZIP

TITLE

D

NAME

ADAMS, DARREL

STREET ADDRESS

6343 REGENCY PARK BLVD
NEW PORT RICHEY FL

CITY - ST - ZIP

TITLE

D

NAME

HOSFORD, PALMER

STREET ADDRESS

6343 REGENCY PARK BLVD
NEW PORT RICHEY FL

CITY - ST - ZIP

TITLE

PD

NAME

CARMAN, AVERILL W.

STREET ADDRESS

6343 ROWAN ROAD
NEW PORT RICHEY FL

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

COLE, NANCY W

NOT APPLICABLE

Change Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

Change Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

Change Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

Change Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

Change Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

Change Addition

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 110.07(3)(b), 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:

Averill W. Carman, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER/DIRECTOR

31 March 95 813 848-2591

Date

Telephone