F COR ANNU	LE NOW: FILING FI PROFIT PORATION JAL REPORT 1997		FLORIDA DEP <b>Sandra</b>	ARTMENT C B. Mortha	DF STATE	May 02 Secre		78	
CLEAN V	WENT # J2623 WATER SYSTEMS, INC. e of Business AVE	M 25	(5) ailing Address 0 WARFIELD AVE						
JITE 31 INICE FL 342		VE	JITE 31 ENICE FL 34292			3. Date incorporated or Qualified 07/25/1986	d <b>3e.</b> Date <b>08/08</b>	/1996	
Principal Pl	lace of Business	28. 26	Mailing Address			4. FEI Number 59-2699261			plied For t Applicable
Sulte, Apt.	#, etc.	27	Suite, Apt. #, etc.		······································	5. Certificate of Status Desired		\$8.75 A	dditional
City & State	6	27	City & State	· · · · · · · · · · · · · · · · · · ·		6. Election Campaign Financing Trust Fund Contribution		\$5.00 Added to	May Be
Zip	Country		Ζφ	Cour	ntry	8. This corporation has liability for	or intangible tax	k under s.	
·····	25 9. Name and Address of Cu	29 Urrent Regis	stered Agent	30		Florida Statutes 10. Name and Address of New I	Yes I		
250	(INNEY, H. LEWIS WARFIELD AVENUE ICE FL 34292			~	83	Iress (P.O. Box Number is Not Accept			
250 VEN	WARFIELD AVENUE ICE FL 34292	7.0502 and 0 State of Flori obligations o	307.1508, Florida Sta da. Such change wa f, Section 607.0505,	: 	83 84 City	tress (P.O. Box Number is Not Accept poration submits this statement for the ation's board of directors. I hereby acc	FL <sup> </sup>	85 Zip C nanging Its	
250 VEN Office or re agent. Lai IGNATURE	WARFIELD AVENUE ICE FL 34292 to the provisions of Sections 607 egistered agent, or both, in the 5 m familiar with, and accept the c	ed agent and for	if applicable (N	tulos, the at. is authorized Florida State	83 84 City bove-named cor 4 by the corpora utos.	poration submits this statement for the ation's board of directors. Thereby acc ared when reinstating)	FL e purpose of ch cept the appoin DATE	nanging its	s registered registered
250 VEN office or re agent. I ar GNATURE LE ME REET ADDRESS	WARFIELD AVENUE ICE FL 34292 to the provisions of Sections 607 egistered agent, or both, in the 5 m familiar with, and accept the c Signature, typed or printed name of register OFF ICERS P MCKINNEY, H. LEWIS 407 ALTAIR ROAD		if applicable (N	tules, the at is authorized Florida Statu 01t Registered 13. 11 111 12 NA 1.3 ST	83 84 City pove-named cor 1 by the corpora- utos. Agent signature required LF ME Rf F1 ADDRESS	poration submits this statement for the ation's board of directors. I hereby acc	FL e purpose of ch cept the appoin DATE FICERS AND D	nanging its	s registered registered
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