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May 06 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

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

DOCUMENT # J46139

1. Corporation Name
Culligan of Florida, Inc.

Principal Place of Business	Mailing Address
1401 Sligh Boulevard P.O. Box 8625 Orlando, FL 32856	1401 Sligh Boulevard P.O. Box 8625 Orlando, FL 32856

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualified: 12/9/96	
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number: 59-2751938	☐ Applied For ☐ Not Applicable
City & State 23	City & State 28	5. Certificate of Status Desired ☐	**$8.75** Additional Fee Required
Zip 24 / Country 25	Zip 29 / Country 30	6. Election Campaign Financing Trust Fund Contribution ☐	**$5.00** May Be Added to Fees
		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No	

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
The Prentice Hall Corporation System, Inc. 1201 Hays Street Tallahassee, FL 32301	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D/C	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	Douglas A. Pertz		1.2 NAME	
STREET ADDRESS	One Culligan Parkway		1.3 STREET ADDRESS	
CITY-ST-ZIP	Northbrook, IL 60062		1.4 CITY-ST-ZIP	
TITLE	D/V	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	Michael E. Salvati		2.2 NAME	
STREET ADDRESS	One Culligan Parkway		2.3 STREET ADDRESS	
CITY-ST-ZIP	Northbrook, IL 60062		2.4 CITY-ST-ZIP	
TITLE	D/S	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	Edward A. Christensen		3.2 NAME	
STREET ADDRESS	One Culligan Parkway		3.3 STREET ADDRESS	
CITY-ST-ZIP	Northbrook, IL 60062		3.4 CITY-ST-ZIP	
TITLE	P	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	Mike Crowell		4.2 NAME	
STREET ADDRESS	1401 Sligh Boulevard		4.3 STREET ADDRESS	
CITY-ST-ZIP	Orlando, FL 32856		4.4 CITY-ST-ZIP	
TITLE	V	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	Thomas E. Pavlick		5.2 NAME	
STREET ADDRESS	One Culligan Parkway		5.3 STREET ADDRESS	JC 5/6
CITY-ST-ZIP	Northbrook, IL 60062		5.4 CITY-ST-ZIP	
TITLE	V/T	☐ DELETE	6.1 TITLE	500002516900 Change ☐ Addition
NAME	Donald A. Fuller		6.2 NAME	-05/08/98--01051--022
STREET ADDRESS	One Culligan Parkway		6.3 STREET ADDRESS	***150.00
CITY-ST-ZIP	Northbrook, IL 60062		6.4 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.

SIGNATURE: Thomas E. Pavlick Thomas E. Pavlick 4/30/98

CR2E034 (10/97)