

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# M78263

Entity Name: FLORIDA WATER WORKS, INC.

FILED
Sep 09, 2008
Secretary of State

Current Principal Place of Business:

505 POWER ROAD
SANFORD, FL 32771

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 471267
LAKE MONROE, FL 32747

New Mailing Address:

FEI Number: 59-2886252

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARKS, CYNTHIA G
505 POWER RD
SANFORD, FL 32711 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DOT () Delete
Name: BARKS, CYNTHIA G
Address: 505 POWER RD
City-St-Zip: SANFORD, FL 32771

Title: VP () Delete
Name: RICHARDSON, CONSTANCE J
Address: 41520 THYME CT
City-St-Zip: EUSTIS, FL 32736

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SEC () Change (X) Addition
Name: HUBBARD, ROBERT M SEC
Address: 505 POWER RD
City-St-Zip: SANFORD, FL 32771 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CYNTHA GAY BARKS

DOT

09/09/2008

Electronic Signature of Signing Officer or Director

Date