

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008131

FILED
Apr 23, 2004
Secretary of State**Entity Name:** FLORIDA SECTION OF THE AMERICAN WATERWORKS ASSOCIATION, INC.**Current Principal Place of Business:**448 BOUCHELLE DRIVE
204
NEW SMYRNA BEACH, FL 32169**New Principal Place of Business:**1212 CANDLEWOOD DRIVE
LAKELAND, FL 33813 US**Current Mailing Address:**448 BOUCHELLE DRIVE
204
NEW SMYRNA BEACH, FL 32169**New Mailing Address:**1212 CANDLEWOOD DRIVE
LAKELAND, FL 33813 US**FEI Number:** 23-7027079**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**ST. JOHN, CHARLOTTE
448 BOUCHELLE DR.
204
NEW SMYRNA BEACH, FL 32169**Name and Address of New Registered Agent:**HINDE, BOBBIE T M
1212 CANDLEWOOD DRIVE
204
LAKELAND, FL 33813 US

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: BOBBIE HINDE

04/23/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** D () Delete
Name: COATES, RICHARD
Address: 10020 SW 108TH STREET
City-St-Zip: MIAMI, FL 33176**Title:** D () Delete
Name: YANEY, GLENN
Address: 2535 LANDMARK DRIVE, # 211
City-St-Zip: CLEARWATER, FL 33761**Title:** D () Delete
Name: NASH, JEFF
Address: 225 E. ROBINSON STREET, #505
City-St-Zip: ORLANDO, FL 328014322**Title:** D () Delete
Name: JOHN, HAGELSKAMP
Address: 2301 MAITLAND CENTER PARKWAY, # 420
City-St-Zip: MAITLAND, FL 32751**Title:** D () Delete
Name: BENNETT, MIKE
Address: 7125 N. CHURCH STREET, 3RD FLOOR
City-St-Zip: TAMPA, FL 33610**Title:** D () Delete
Name: TORBERT, JACQUELINE
Address: 8100 PRESIDENT'S DRIVE, #200
City-St-Zip: ORLANDO, FL 32809**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
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City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GLENN YANEY

D

04/23/2004

Electronic Signature of Signing Officer or Director

Date