

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 08, 2003 8:00 am
Secretary of State

09-08-2003 90324 015 ****61.25

0014780

DOCUMENT # NO2000009401

1. Entity Name

WATER SYMPOSIUM OF FLORIDA, INC.



Principal Place of Business

720 TURKEY OAK LANE
NAPLES FL 34108

Mailing Address

720 TURKEY OAK LANE
NAPLES FL 34108

2. Principal Place of Business

PO Box 1261

3. Mailing Address

PO Box 1261

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Immokalee, FL

City & State

Immokalee, FL

4. FEL Number

83-0349906

Applied For

Not Applicable

Zip

34143

Country

USA

Zip

34143

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CARTER, JAMES D
720 TURKEY OAK LANE
NAPLES FL 34108

7. Name and Address of New Registered Agent

Name

Michael R. Ramsey

Street Address (P.O. Box Number is Not Acceptable)

2449 Senders Pines Circle

PO Box 1261

City

Immokalee

FL

Zip Code

34142

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
After September 10, 2003, min will be \$236.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE ~~D~~ ☒ Delete
NAME ~~CARTER, JAMES D~~
STREET ADDRESS ~~720 TURKEY OAK LANE~~
CITY-ST-ZIP ~~NAPLES FL 34108~~

TITLE ~~D~~ ☐ Delete
NAME ~~TEARS, CLARENCE S JR~~
STREET ADDRESS ~~320 LAMBTON LANE~~
CITY-ST-ZIP ~~NAPLES FL 34104~~

TITLE ~~D~~ ☐ Delete
NAME ~~HAINSWORTH, MELODY~~
STREET ADDRESS ~~2655 NORTHBROOKE DR~~
CITY-ST-ZIP ~~NAPLES FL 34119~~

TITLE ~~D~~ ☐ Delete
NAME ~~BAUER, MICHAEL L~~
STREET ADDRESS ~~109 DEBRON DRIVE~~
CITY-ST-ZIP ~~NAPLES FL 34112~~

TITLE ~~D~~ ☐ Delete
NAME ~~ELLIS, DAVID L~~
STREET ADDRESS ~~4779 ENTERPRISES AVE~~
CITY-ST-ZIP ~~NAPLES FL 34104~~

TITLE ~~D~~ ☐ Delete
NAME ~~HAMEL, RON~~
STREET ADDRESS ~~P O BOX 1219~~
CITY-ST-ZIP ~~LA BELLE FL 33975~~

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ~~Treasurer~~ ☐ Change ☒ Addition
NAME ~~Michael R. Ramsey~~
STREET ADDRESS ~~PO Box 1261~~
CITY-ST-ZIP ~~Immokalee, FL 34143~~

TITLE ~~D~~ ☐ Change ☒ Addition
NAME ~~David Burr~~
STREET ADDRESS ~~PO Box 3455~~
CITY-ST-ZIP ~~FL Myers, FL 33718~~

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Michael R. Ramsey, Treas. 09.05.03 657.2601

CR2E037 (4/03)