## 2006 NOT-FOR-PF FIT CORPORATION ANNUAL REPORT

2006 NOT-FOR-PF FIT CORPORATION ANNUAL REPORT			FILED Aug 03, 2006 8:00 am	
DOCUMENT # N45180  1. Entity Name HUNTINGTON WATER MANAGEMENT ASSOCIATION, INC.			Secretary 07-19-2006 9000	y of State 01 019 ***122.50
Principal Place of Business 2901 SW 149TH AVE STE 120 MIRAMAR, FL 33027 US	TH AVE 2901 SW 149TH AVE STE 120 33027 US MIRAMAR, FL 33027 US			
2. Principal Place of Business 3401 Sw16046 Art. Suite_Apt. #, etc.	3. Mailing Address 3 401 5W 160 Hb AVR - Sulte, Apt. #, etc. 7.00		-	
City & State	City & State		4. FEI Number	R2E037 (4/06)  Applied For
Zip 33027 Country A	Mirama 21033027	Country A	65-0255168  5. Certificate of Status Desired	Not Applicable 88.75 Additional
6. Name and Address of Curren		US#	7. Name and Address of New Regist	Fee Required
STE 120 MIRAMAR, FL 33027			15. Marlene Diaz 15. Box Number 18 191, Acceptable). # 330 15 amar FL 253027	
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, hybrid or printed name of registered-agent and title it applicable.  (NOTE: Registered Agent signature required when reinstating)  OATE				
Filling Fee Is \$61.25 9. Election Campai Due by September 6, 2006 Trust Fund Contr		· · ·		checkspayable <u>sto</u> Xeparthenisorsijata
10. OFFICERS AND D	IRECTORS Delete	11. TITLE PD   M	ADDITIONS/CHANGES TO OFFICERS A	Dichara Diagram
NAME MONTERO, ARMANDO MR. STREET ADDRESS 2901 SW 149TH AVE STE 120 CITY-ST-ZIP MIRAMAR, FL 33027	J. Greek	NAME M STREET ADDRESS 3	arline Staz 1015W 160th Fre Viraman FL 32	#330
TITLE VD  NAME BECKER, GLENN  STREET ADDRESS 2901 SW 149TH AVE STE 120  CITY-S1-ZIP MIRAMARN, FL 33027	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change Addition
TITLE TD NAME GALE, BRIAN S STREET ADDRESS 2901 SW 149TH AVE STE 120 CITY-ST-ZIP MIRAMAR, FL 33027	<b>≯</b> Dejete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	· Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ف د	Change Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:  SIGNATURE:  SIGNATURE AND TYPED OR PRINTED MAME OF SIGNING OFFICER OR DIRECTOR				