

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

FILED
Apr 16, 2003 8:00 am
Secretary of State

04-16-2003 90464 001 ***122.50

DOCUMENT # N45180

1. Entity Name
HUNTINGTON WATER MANAGEMENT ASSOCIATION, INC.



Principal Place of Business
300 SE 2ND STREET
8TH FLOOR
FORT LAUDERDALE FL 33301-1907
US

Mailing Address
300 SE 2ND STREET
8TH FLOOR
FORT LAUDERDALE FL 33301-1907
US

2. Principal Place of Business
2901 SW 149TH AVENUE

3. Mailing Address
2901 SW 149TH AVENUE

Suite, Apt. #, etc.
SUITE 120

Suite, Apt. #, etc.
SUITE 120

City & State
MIRAMAR FL

City & State
MIRAMAR FL

Zip Country
33027 US

Zip Country
33027 US



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number 65-0255168

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SIEGEL, DAVID
300 SE 2ND STREET
8TH FLOOR
FORT LAUDERDALE FL 33301-1907

Name
MONTERO, ARMANDO
Street Address (P.O. Box Number is Not Acceptable)
2901 SW 149TH AVENUE
SUITE 120
City
MIRAMAR FL Zip Code
33027

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 **ARMANDO MONTERO**
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

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D O'SHEA, DENNNY 300 SE 2ND STREET 8TH FLOOR FORT LAUDERDALE FL 33301-1907 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SIEGEL, DAVID 300 SE 2ND STREET 8TH FLOOR FORT LAUDERDALE FL 33301-1907 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ESPOSITO, ROBERT 300 SE 2ND STREET 8TH FLOOR FORT LAUDERDALE FL 33301-1907 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MONTERO, ARMANDO 2901 SW 149TH AVENUE, SUITE 120 MIRAMAR, FL 33027 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BECKER, GLENN 2901 SW 149TH AVENUE, SUITE 120 MIRAMAR, FL 33027 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GALE, BRIAN S. 2901 SW 149TH AVENUE, SUITE 120 MIRAMAR, FL 33027 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: SIGNATURE REQUIRED

3/17/03

CR2E037 (10/02)