## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment with

SIGNATURE:

an address.

er like empowered.

ED NAME OF SIGNING OFFICER OR DIRECTO

## May 02, 2006 8:00 am DOCUMENT # N50023 Secretary of State WATER MANAGEMENT INSTITUTE, INC. 05-02-2006 90202 039 \*\*\*\*61.25 Principal Place of Business Mailing Address 2702 CARDINAL DRIVE P.O. BOX 6446 VERO BEACH, FL. 32963 US VERO BEACH, FL 32961 US 2. Principal Place of Business 3. Mailing Address 31 West 20th St. P.O. Box 10441 Suite, Apt. #, etc. Suite, Apt. #, etc. 04262006 Chq-NP CR2E037 (11/05) Suite 202 4. FEI Number 59-3133873 Applied For City & State City & State Beach, Florida F L Riviera Riviera Not Applicable Zip Country 3 3 4 1 9 Country U.S.A \$8.75 Additional 5. Certificate of Status Desired 33404 USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WARD, GERALD M. VANATTA, MICHAEL N Street Address (P.O. Box Number is Not Acceptable) 2702 CARDINAL DRIVE W 20TH STREET. SUITE 202 VERO BEACH, FL 32963 Zip Code 33404 RIVIERA BEACH. 8. The above named entity siponits 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. Gerald M. Ward April 2006 SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Filing Fee Is \$61.25 \$5.00 May Be Make check payable to $\Box$ Trust Fund Contribution Florida Department of State Due by May 1, 2006 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. DV πιε **⊠** Delete IIITEDD LINDAHL, JR. P.E., LENNART J. Change Addition YOUNG, SANFORD N NAME NAME 3550 S.W. CORPORATE PARKWAY STREET ADDRESS 949 BRIARCLIFF ROAD STREET ADDRESS PALM CITY, FL 34990 CITY-ST-ZIP TALLAHASSEE, FL CITY-ST-ZIP DT TITLE Delete TITLE ☐ Change ☐ Addition NAME BLAIN, L. M. NAME STREET ADDRESS 801 S BOULEVARD STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33606 CITY-ST-ZIP TITLE Delete ☐ Change ☐ Addition BRAIDS, OLIN C. NAME NAME STREET ADDRESS 9119 CORPORATE LAKE DRIVE, SUITE 150 STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33634 CITY-ST-ZIP TITLE ☐ Delete TITLE D Channe ☐ Addition HIGGINS, ROBERT W NAME -STREET ADDRESS 4623 FOREST HILL BLVD., STE. 113 STREET ADDRESS CITY-ST-7IP WEST PALM BEACH, FL CITY-ST-7IP TITLE □ Delete TITLE ☐ Change Addition MANSON, DOUGLAS J ESQUIRE NAME NAME STREET ADDRESS 712 S. OREGON AVENUE STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33606 CITY-ST-7IP TITLE Delete TITLE Change ☐ Addition WARD, GERALD M NAME NAME STREET ADDRESS 51 W 20TH STREET, SUITE 202 STREET ADDRESS 31 M 26th Street, Suite 202 CITY-ST-ZIP RIVIERA BEACH, FL 33404 CITY-ST-7IP 12. Thereby 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 or prevented this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on a stractment with an address, with all other like empowered.

**FILED** 

Daytime Phone #