

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N51289 (9)

1. Corporation Name

FLORIDA SECTION, AMERICAN WATER RESOURCES ASSOCIATION, INC.



Principal Place of Business

Mailing Address

1301 RIVER PLACE BLVD.  
SUITE 1500  
JACKSONVILLE FL 32207  
US

1301 RIVERPLACE BLVD.  
SUITE 1500  
JACKSONVILLE FL 32207  
US

3. Date Incorporated or Qualified  
10/14/1992

3a. Date of Last Report  
01/30/1995

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

9. Name and Address of Current Registered Agent

PARKER, MARCIA PENMAN  
1301 RIVERPLACE BLVD.  
SUITE 1500  
JACKSONVILLE FL 32207

4. FEI Number  
59-3176538

Applied For  
Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐

Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 617.0503, Florida Statutes.

SIGNATURE

*[Signature]*

(NOTE: Registered Agent signature required when reinstating)

*[Signature]*  
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☒ DELETE  
NAME MCLEAN, RICHARD V.  
STREET ADDRESS 2379 BROAD ST.  
CITY-ST-ZIP BROOKSVILLE FL

11 TITLE ☐ Change ☒ Addition  
12 NAME PADERA, CHARLES A  
13 STREET ADDRESS P.O. BOX 1429  
14 CITY-ST-ZIP PALM BEACH, FL 33411-1429

TITLE D ☐ DELETE  
NAME MORGAN, JOHN J.  
STREET ADDRESS 8681 WINDY CIRCLE  
CITY-ST-ZIP BOYNTON BEACH, FL

21 TITLE ☐ Change ☐ Addition  
22 NAME  
23 STREET ADDRESS  
24 CITY-ST-ZIP

TITLE D ☐ DELETE  
NAME WARD, GERALDM.  
STREET ADDRESS 31 W. 20TH ST.  
CITY-ST-ZIP RIVERIA BEACH FL

31 TITLE ☐ Change ☐ Addition  
32 NAME  
33 STREET ADDRESS  
34 CITY-ST-ZIP

TITLE D ☐ DELETE  
NAME KOWALSKY, CARLYN H.  
STREET ADDRESS 1000 COLOR PLACE  
CITY-ST-ZIP APOPKA FL

41 TITLE ☐ Change ☐ Addition  
42 NAME  
43 STREET ADDRESS  
44 CITY-ST-ZIP

TITLE D ☐ DELETE  
NAME PARKER, MARCIA PENMAN  
STREET ADDRESS 1301 RIVERPLACE BLVD., SUITE 1500  
CITY-ST-ZIP JACKSONVILLE FL

51 TITLE ☐ Change ☐ Addition  
52 NAME  
53 STREET ADDRESS  
54 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition  
62 NAME  
63 STREET ADDRESS  
64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13, unchanged, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

26 Jan 96

Date

407/863-1215

Daytime Phone #

CR2E037 (12/95)