

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N51289

1. Entity Name

FLORIDA SECTION, AMERICAN WATER RESOURCES ASSOCI

Principal Place of Business

4575 CARTER RD
ST AUGUSTINE FL 32086
US

Mailing Address

4575 CARTER RD
ST AUGUSTINE FL 32086-5817
US

2. Principal Place of Business

7 Tom Roberts Road

Suite, Apt. #, etc.

3. Mailing Address

7 Tom Roberts Road

Suite, Apt. #, etc.

City & State

PANACEA, Florida

City & State

PANACEA, Florida

Zip

32346

Country

US

Zip

32346

Country

US

4. FEI Number

59-3176538

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CULLUM, MICHAEL G
4575 CARTER RD
ST AUGUSTINE FL 32086

7. Name and Address of New Registered Agent

Name RAND Edelstein Jr.

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

7 Tom Roberts Road

City PANACEA

FL

Zip Code 32346

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.

SIGNATURE RAND Edelstein Jr. Treasurer

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

(NOTE: Registered Agent signature required when reinstating)

3/19/00

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
Department of State

10. OFFICERS AND DIRECTORS

TITLE D
NAME PADERA, CHARLES A.
STREET ADDRESS HIGHWAY 100 WEST
CITY-ST-ZIP PALATKA FL 32177 ☐ Delete

TITLE D
NAME STEBUISKY, RICK J
STREET ADDRESS 5405 CYPRESS CENTER DR #200
CITY-ST-ZIP TAMPA FL 33609 ☐ Delete

TITLE D
NAME CULLUM, MICHAEL G
STREET ADDRESS 4575 CARTER RD
CITY-ST-ZIP ST AUGUSTINE FL 32086 ☐ Delete

TITLE D
NAME KOWALSKY, CARLYN H.
STREET ADDRESS 1000 COLOR PLACE
CITY-ST-ZIP APOPKA FL 32703 ☐ Delete

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

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

TITLE ☐ Change ☒ Addition
NAME William C. Stimmel
STREET ADDRESS 7335 Lake Eblenor Drive
CITY-ST-ZIP Orlando, FL. 32809

TITLE ☐ Change ☒ Addition
NAME RAND Edelstein Jr.
STREET ADDRESS 7 Tom Roberts Road
CITY-ST-ZIP PANACEA, Florida 32346

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/19/00

Date

(850) 933-6870

Daytime Phone #

CR2E037 (9/99)