## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N51289

FILED Mar 31, 2004 Secretary of State

Entity Name: FLORIDA SECTION, AMERICAN WATER RESOURCES ASSOCIATION, INC.

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
730 NE W <i>A</i> BLDG A	ALDO RD		8659 BAYF STE 200	PINE ROAD		
	LE, FL 32641	US	JACKSON	VILLE, FL 32256 US		
Current Mailing Address:			New Maili	New Mailing Address:		
730 NE WA BLDG A		LIG.	STE 200	PINE ROAD		
	LE, FL 32641	US		VILLE, FL 32256 US	of Otation Denimal ( )	
FEI Number:		.,	ımber Not App	• •	of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
C/O JONES 730 NE W <i>A</i>	MB, ALLAN S, EDMUNDS & ALDO RD BLDG LLE, FL 32641	i A	C/O CDM 8659 BAYF	VICTOR, PATRICK R TREAS. C/O CDM 8659 BAYPINE ROAD STE 200 JACKSONVILLE, FL 32259 US		
The above in the State		bmits this statement for the purpose	of changing i	ts registered office or reg	gistered agent, or both,	
SIGNATUR	RE: PATRICK F	R. VICTOR		03/	31/2004	
	Electronic	Signature of Registered Agent		D	ate	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D () E BIDDLECOMB, A 730 NE WALDO I GAINESVILLE, FI	RD BLDG A	Title: Name: Address: City-St-Zip:	D (X) Change (VICTOR, PATRICK R 8659 BAYPINE RD STE 200 JACKSONVILLE, FL 32256	)	
Title: Name: Address: City-St-Zip:	D () E RUMANIK, ROGE 227 N BRONOUG TALLAHASSEE, F	H ST STE3015	Title: Name: Address: City-St-Zip:	( ) Change( )	) Addition	
Title: Name: Address: City-St-Zip:	D () E CULLUM, MICHA 4575 CARTER RI ST AUGUSTINE,		Title: Name: Address: City-St-Zip:	D (X) Change ( BIDDLECOMB, ALLAN 730 NE WALDO RD BULDO GAINESVILLE, FL 32641		
Title: Name: Address: City-St-Zip:	MESIANO, MICHA	K BLVD, SUITE #11	Title: Name: Address: City-St-Zip:	( ) Change()	) Addition	
Title: Name: Address: City-St-Zip:	D () E STIMMEL, WILLI. 7335 LAKE ELLE ORLANDO, FL 3	NOR DRIVE	Title: Name: Address: City-St-Zip:	()Change()	Addition	
Title: Name: Address: City-St-Zip:	D () E EDELSTEIN, RAN 7 TOM ROBERT PANACEA, FL 32	ROAD	Title: Name: Address: City-St-Zip:	()Change()	Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PATRICK R. VICTOR D 03/31/2004