

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

**FILED**  
**Jan 15, 2003 8:00 am**  
**Secretary of State**

01-15-2003 90307 032 \*\*\*\*61.25

**DOCUMENT # N93000003476**

1. Entity Name

**COMMITTEE FOR RESPONSIBLE WATER USE OF SOUTHWEST  
FLORIDA, INC.**



Principal Place of Business

**P.O. BOX 866  
PALMETTO FL 34220**

Mailing Address

**P.O. BOX 866  
PALMETTO FL 34220**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0417711**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**MANSON, DOUGLAS P  
100 SOUTH ASHLEY DRIVE  
SUITE 1190  
TAMPA FL 33602**

7. Name and Address of New Registered Agent

Name

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

City

**FL**

Zip Code

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

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

TITLE **PD** ☐ Delete  
NAME **SPENCER, ROBERT N**  
STREET ADDRESS **4820 RIVERVIEW BLVD.**  
CITY-ST-ZIP **BRANDON FL 34209**

TITLE **T** ☐ Delete  
NAME **CARRAWAY, MAC**  
STREET ADDRESS **501 10TH STREET WEST**  
CITY-ST-ZIP **PALMETTO FL 34221**

TITLE **D** ☐ Delete  
NAME **BROCK, TOMMY**  
STREET ADDRESS **802 E TRAPNELL RD**  
CITY-ST-ZIP **PLANT CITY FL 33566**

TITLE **D** ☐ Delete  
NAME **HAMEL, RON**  
STREET ADDRESS **P.O. BOX 1319 N/A**  
CITY-ST-ZIP **LABELLE FL 33935**

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

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STREET ADDRESS  
CITY-ST-ZIP

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

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**

1/7/03

941-722-3291

CR2E037 (10/02)

Attachment N 93000003476  
20000769

COMMITTEE FOR RESPONSIBLE WATER USE  
Detail of Contribution Deposits for Year 2002

NAME

DEPOSITED

AMOUNT

NO ACTIVITY