

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005601

FILED
Apr 05, 2006
Secretary of State

Entity Name: FOWLER'S BLUFF WATER SYSTEM ASSOCIATION, INC.

Current Principal Place of Business:

15002 N.W. 46TH LANE
CHIEFLAND, FL 32626 US

New Principal Place of Business:

Current Mailing Address:

15002 N.W. 46TH LANE
CHIEFLAND, FL 32626 US

New Mailing Address:

FEI Number: 59-3214062

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLLUM, R. P
15511 NW 46TH LANE
CHIEFLAND, FL 32626 US

Name and Address of New Registered Agent:

ROESCH, ANITA
15411 NW 46TH LANE
CHIEFLAND, FL 32626 US

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: ANITA ROESCH

04/05/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: COLLUM, BOB
Address: 15511 NW 46TH LANE
City-St-Zip: CHIEFLAND, FL 32626

Title: V () Delete
Name: ROESCH, ANITA
Address: 15411 N.W. 46TH LANE
City-St-Zip: CHIEFLAND, FL 32626

Title: S () Delete
Name: TISON, PRISCILLA
Address: 15619 N.W. 46TH LANE
City-St-Zip: CHIEFLAND, FL 32626

Title: T () Delete
Name: LAGUEUX, RON
Address: 4496 NW 152ND AVE
City-St-Zip: CHIEFLAND, FL 32626

Title: D () Delete
Name: OWENS, LISA
Address: 4351 N.W. 153RD COURT
City-St-Zip: CHIEFLAND, FL 32626

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ROESCH, ANITA
Address: 15411 NW 46TH LANE
City-St-Zip: CHIEFLAND, FL 32626

Title: V (X) Change () Addition
Name: TISON, PRISCILLA
Address: 15619 N.W. 46TH LANE
City-St-Zip: CHIEFLAND, FL 32626

Title: S (X) Change () Addition
Name: BRYAN, BETTY
Address: 15311 N.W. 46TH LANE
City-St-Zip: CHIEFLAND, FL 32626

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: ANITA ROESCH

P

04/05/2006

Electronic Signature of Signing Officer or Director

Date