

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N97000002767

FILED
Sep 13, 2002
Secretary of State

Entity Name: T&T WATER MANAGEMENT ASSOCIATION, INC.

Current Principal Place of Business:

365 5TH AVENUE SOUTH, #301
NAPLES, FL 34102

New Principal Place of Business:

365 5TH AVENUE SOUTH, #201
NAPLES, FL 34102

Current Mailing Address:

365 5TH AVENUE SOUTH, #301
NAPLES, FL 34102

New Mailing Address:

365 5TH AVENUE SOUTH, #201
NAPLES, FL 34102

FEI Number: 65-0819978

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMAS, CHARLES
365 5TH AVENUE SOUTH, #301
NAPLES, FL 34102

Name and Address of New Registered Agent:

THOMAS, CHARLES
365 5TH AVENUE SOUTH, #201
NAPLES, FL 34102

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:

09/13/2002

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: THOMAS, CHARLES
Address: 365 5TH AVENUE SOUTH, #301
City-St-Zip: NAPLES, FL 34102

Title: D () Delete
Name: ROEDER, MICHAEL
Address: 1625 HENDRY STREET #301
City-St-Zip: FORT MYERS, FL 33901

Title: D () Delete
Name: DEWHIRST, NED
Address: 6202 PRESIDENTIAL COURT #D
City-St-Zip: FORT MYERS, FL 33907

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: THOMAS, CHARLES
Address: 365 5TH AVENUE SOUTH, #201
City-St-Zip: NAPLES, FL 34102

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 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: CHARLES THOMAS

D

09/13/2002

Electronic Signature of Signing Officer or Director

Date