

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 14, 2001 8:00 am**  
**Secretary of State**

03-14-2001 90007 032 \*\*\*150.00

**DOCUMENT # P00000037168**

1. Entity Name

**BOYNTON WATERWORKS COMPANY**

Principal Place of Business

1801 NE 4TH ST., STE. 200  
BOYNTON BEACH FL 33435

Mailing Address

1801 NE 4TH ST., STE. 200  
BOYNTON BEACH FL 33435

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

2840 NW Boca Raton Blvd

Suite, Apt. #, etc.

Suite 101

City & State

Boca Raton, FL

Zip

33431

Country

USA

4. FEI Number

05-1001008

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**BURKE, NANCY M**  
106 E. COLLEGE AVE., STE. 1200  
TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent

Name **Spillane & Company Inc**

Street Address (P.O. Box Number is Not Acceptable)  
2840 NW Boca Raton Blvd Ste 101

Suite 101

City **Boca Raton, FL**

FL

Zip Code

33431

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 **Spillane & Company Inc. by Mark D. Spillane, President** **1-8-01**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete  
NAME **MARK D. SPILLANE**  
STREET ADDRESS **2840 NW BOCA RATON BLVD SUITE 200**  
CITY-ST-ZIP **BOCA RATON, FL 33431**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
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TITLE ☐ Delete  
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STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
NAME **MARK D. SPILLANE**  
STREET ADDRESS **2840 NW BOCA RATON BLVD SUITE 101**  
CITY-ST-ZIP **BOCA RATON, FL 33431**

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

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

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

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**Mark D. Spillane, President**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**1/8/01 561-742-1201**

Date Daytime Phone #

0307961

CR2E034 (10/00)