

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 26, 2001 8:00 am
Secretary of State
 04-26-2001 90329 047 ***150.00

DOCUMENT # P00000044827

1. Entity Name

WATERS WAY, INC.

Principal Place of Business

**3740 KORI ROAD #1
 JACKSONVILLE FL 32257**

Mailing Address

**3740 KORI ROAD #1
 JACKSONVILLE FL 32257**

2. Principal Place of Business

8535 Baymeadows Rd. #46

3. Mailing Address

8535 Baymeadows Rd. #46

Suite, Apt. #, etc.

JACKSONVILLE, Florida

Suite, Apt. #, etc.

JACKSONVILLE, Florida

City & State

City & State

Zip **32256**

Country **USA**

Zip **32256**

Country **USA**

4. FEI Number

59-3645534

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**HONEYCUTT, ROBERT C III
 3740 KORI ROAD #1
 JACKSONVILLE FL 32257**

7. Name and Address of New Registered Agent

Name

Robert C. Honeycutt III

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

8535 Baymeadows Rd. #46

City

JACKSONVILLE

State

Zip Code

32256

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

Robert C. Honeycutt III

Robert C. Honeycutt III

4/20/01

Signature, typed or printed name of agent, stock agent, and the filer, respectively.

(NOTE: Registered Agent signature is required when submitting a change of agent.)

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	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	☐ Delete
NAME	
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	President
STREET ADDRESS	Donald J. Clark
CITY - ST - ZIP	3700 Oldfield Crossing Dr. # 319 Jacksonville, FL. 32213
TITLE	☐ Change ☐ Addition
NAME	V.P.
STREET ADDRESS	Robert C. Honeycutt III
CITY - ST - ZIP	8713 Briarwood Rd. Jacksonville, FL. 32217
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	

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 C/(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:

Robert C. Honeycutt III

4/20/01

(904) 730-0006

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)