

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000014950

FILED
Apr 27, 2007
Secretary of State

Entity Name: ATLANTIS WATER SERVICES, INC.

Current Principal Place of Business:

P.O. BOX 712
BROOKSVILLE, FL 34605 US

New Principal Place of Business:

100 N MAIN
BROOKSVILLE, FL 34605 US

Current Mailing Address:

P.O. BOX 712
BROOKSVILLE, FL 34605 US

New Mailing Address:

FEI Number: 14-1861561 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANTHONY, SHERRI
PO BOX 712
BROOKSVILLE, FL 34605 US

Name and Address of New Registered Agent:

ANTHONY, SHERRI
100 N MAIN
BROOKSVILLE, FL 34605 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: SHERRI ANTHONY

04/27/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PRUITT, ROBERT D
Address: PO BOX 712
City-St-Zip: BROOKSVILLE, FL 34605 US

Title: VP () Delete
Name: ANTHONY, SHERRI
Address: PO BOX 712
City-St-Zip: BROOKSVILLE, FL 34605 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT PRUITT

PRES

04/27/2007

Electronic Signature of Signing Officer or Director

Date