2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 31, 2006 08:00 AM Secretary of State

DOCUMENT # P04000017649 1. Entity Name All STOCK WATER AND WASTE WATER SERVICE, INC.						Secret	ary of	State
Principal Place of Business Mailing Address 5895 TIMBER VALLEY DR 5895 TIMBER VALLEY DR LAKE WORTH, FL 33463 LAKE WORTH, FL 33463						SII 8800 0160 0000 6000 6000	55 0 1 (55 1 (55 18 6 5)))	0 /26/2 0 5/50/21 Fr 58/26/
DO NOT WRITE IN THIS SPACE					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	01102006 No Chg-P CR2E034 (11/05)		
				ACE	4. FEI Numb	4. FE) Number 20-0671581		Applied For Not Applicable
	& Name and Stricted	f Current Banist	ared Agent		5. Certificate	e of Status Desired		5 Additional equired
6. Name and Address of Current Registered Agent AILSTOCK, ROBERT D 5895 TIMBER VALLEY DR LAKE WORTH EL 33463						NOT WI	_	· · · · · · · · · · · · · · · · · · ·
LAKE WORTH, FL 33463			•		· IN	THIS SP.	ACE	
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. I am familiar with, and accept the obligations of registered agent.								
SIGNATURE								
FILE NOWIII FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.					5.00 May Be Added to Fees	08/10/06-	1412563 80052-003	3 150.00
10. SILE NAME SIREET ADDRESS CITY-ST-ZIP	OFFIC PSD AILSTOCK, ROBERT D 5895 TIMBER VALLEY LAKE WORTH, FL 334	DR -	TORS			_		-
HILE NAME STREET ADDRESS CITY-ST-ZIP						· · · · · · · · · · · · · · · · · · ·		
THILE NAME STREET ADDRESS CITY-ST-ZIP			<u>-</u>		DO	NOT WI	RITE	
name Sireli address City-Si-Zip					IN.	THIS SP	ACE	
TURE NAME STREET ADORESS CITY-S7-ZIP						·		
title Name Street address City-St-Zip								·
12. I hereby of indicated of the concentration	certify that the information sur on this report or supplement poration or the receiver or bu or on an attachment with an	optied with this filing a report is true are stee empowered address with all of	ng does not quality for the no accurate and that my sig to execute this report as re other like empowered.	exemptions contain mature shall have the quired by Chapter 5	ned in Chapter 115 ne same legal effection 307, Florida Statute	9. Florida Statutes. I function is if made under oa is; and that my name of	irther certify that th; that I am an o appears in Block	the information flicer or director 10 or Block 11 if
SIGNAT	URE:	TYPED OR PRINTED N	Rubers Signing Officer or dir	t O Ailu	toole	1/27/b&	(561) 60'	- 990\$