

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000084522

FILED
May 01, 2007
Secretary of State

Entity Name: ARTESIAN WATER TREATMENT, INC.

Current Principal Place of Business:

3825 W MAIN STREET
LEESBURG, FL 34748 US

New Principal Place of Business:

201 FIRST ST
TAVARES, FL 32778 US

Current Mailing Address:

3825 W MAIN STREET
LEESBURG, FL 34748 US

New Mailing Address:

201 FIRST ST
TAVARES, FL 32778 US

FEI Number: 20-5080622

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WELCH, THOMAS D
3825 W MAIN STREET
LEESBURG, FL 34748 US

Name and Address of New Registered Agent:

WELCH, THOMAS D
201 FIRST ST
TAVARES, FL 32778 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:

05/01/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WELCH, THOMAS D
Address: 3825 W MAIN STREET
City-St-Zip: LEESBURG, FL 34748 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WELCH, THOMAS D
Address: 201 FIRST ST
City-St-Zip: TAVARES, FL 32778 US

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: THOMAS D. WELCH

P

05/01/2007

Electronic Signature of Signing Officer or Director

Date