FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

APPROVED AND FILED

95 MAR -9 AM 8:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

000001426820
-03/10/95--01091--005
****200.00 ****200.00

CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P22293** (5)

1. Corporation Name

GRAYSON MOUNTAIN WATER COMPANY, INCORPORATED

Principal Place of Business	Mailing Address
328 EAST MAIN STREET INDEPENDENCE VA 24348	328 EAST MAIN STREET INDEPENDENCE VA 24348

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 12/27/1988

3a. Date of Last Report: 03/28/1994

2. Principal Place of Business — 21:

2a. Mailing Address — 26:

4. FEI Number: 65-0095484 ☐ Applied For ☐ Not Applicable

Suite, Apt. #, etc. — 22:

Suite, Apt. #, etc. — 27:

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

City & State — 23:

City & State — 28:

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

Zip — 24: Country — 25:

Zip — 29: Country — 30:

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

MORRISON, CHRISTOPHER
22366 MARTELLA AVENUE
BOCA RATON FL 33308

10. Name and Address of New Registered Agent

81 Name: Morrison, Christopher

82 Street Address (P.O. Box Number is Not Acceptable): 6401 S. Congress Ave. #270

83:

84 City: Boca Raton, FL 85 Zip Code: 33487

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: [signature] 3-6-95

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PV	1.1 TITLE	PV	☒ Change ☐ Addition
NAME	MORRISON, CHRIS	1.2 NAME	Morrison, Chris	
STREET ADDRESS	22366 MARTELLA AVE	1.3 STREET ADDRESS	6401 S. Congress Ave. #270	
CITY-ST-ZIP	BOCA RATON FL	1.4 CITY-ST-ZIP	Boca Raton, FL 33487	
TITLE	TD	2.1 TITLE	TD	☒ Change ☐ Addition
NAME	MORRISON, CHRIS	2.2 NAME	Morrison, Chris	
STREET ADDRESS	22366 MARTELLA AVE	2.3 STREET ADDRESS	6401 S. Congress Ave. #270	
CITY-ST-ZIP	BOCA RATON FL	2.4 CITY-ST-ZIP	Boca Raton, FL 33487	
TITLE	S	3.1 TITLE	S	☒ Change ☐ Addition
NAME	MORRISON, LIZE	3.2 NAME	Morrison, CHRIS	
STREET ADDRESS	22366 MARTELLA AVE	3.3 STREET ADDRESS	6401 S. Congress Ave. #270	
CITY-ST-ZIP	BOCA RATON FL	3.4 CITY-ST-ZIP	Boca Raton, FL 33487	
TITLE		4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME	TS. 3/9/95	
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] 3-6-95 407-241-8805

SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL Date Daytime Phone #

04/00007 FN