

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 10 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P92000010985 (9)
 1. Corporation Name
WATER TREATMENT CO.



Principal Place of Business 315 SW PARK ST OKEECHOBEE FL 34974 US	Mailing Address P.O. BOX 2313 OKEECHOBEE FL 34972 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 12/10/1992
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number 65-0376992
22. City & State	27. City & State	Applied For <input type="checkbox"/> Not Applicable
23. Zip	28. Zip	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
24. Country	29. Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
25. Country	30. Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent CROSS, ANDREW G 1029 NW 113TH DRIVE OKEECHOBEE FL 34972		10. Name and Address of New Registered Agent	
		81. Name	
		82. Street Address (P.O. Box Number is Not Acceptable)	
		83.	
		84. City	FL 85. Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PT <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CROSS, ANDREW G	1.2 NAME	
STREET ADDRESS	1029 NW 113TH DRIVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	OKEECHOBEE FL	1.4 CITY-ST-ZIP	
TITLE	VPS <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CROSS, DENISE L.	2.2 NAME	
STREET ADDRESS	1029 NW 113TH DRIVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	OKEECHOBEE FL	2.4 CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MEEKS, MICHAEL	3.2 NAME	Secretary
STREET ADDRESS	1029 NW 113TH DRIVE	3.3 STREET ADDRESS	Maria G. Chesser
CITY-ST-ZIP	OKEECHOBEE FL	3.4 CITY-ST-ZIP	10784 NW 4th Avenue
TITLE	S <input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	TINDALL LARRY	4.2 NAME	Director
STREET ADDRESS	2226 NW 6TH STREET	4.3 STREET ADDRESS	Michael Shane Raulerson
CITY-ST-ZIP	OKEECHOBEE FL	4.4 CITY-ST-ZIP	17900 HWY 98 North
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing 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.

CR2E034 (10/97)