## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT

1996



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

DOCUMENT # 1. Corporation Name

P93000064582 (8)

**BIG WATER, INC.** 





129 N. LA PAHOKEE		P.O. BOX 675 PAHOKEE FL 33	P.O. BOX 675 PAHOKEE FL 33476						
						3. Date Incorporated or Qualified 09/13/1993	3a. Date	05/01	/1995
2. Principal Pl	ace of Business	2a. Mailing Address	<b>⊢</b> ¬ ~			4. FEI Number 65-0484427			Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc 27	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	9	City & State				Election Campaign Financing     Trust Fund Contribution	S5.00 May Be Added to Fees		
Zip 24	Country 25	7/p	30 Coun	try		This corporation has liability for intangible tax under s 190.032, Florida Statutes			
	9. Name and Address of C	urrent Registered Agent		31	Name	10. Name and Address of New F	legistered	Agent	<u>-</u>
TILLIS	, W F			$\perp$					
129 N	. LAKE AVE. KEE FL		L	33	Street Add	lress (P.O. Box Number is Not Acceptat	He)		
					City			85	Zip Code
11 Purcuent	to the provisions of Sections 607	0500 and 502 1502 Finding Ca	at don too obje				<u> </u>	.   ' '	· ·
or register	ed agent, or both, in the State of	.dodz and 607.1508, Florida St f Florida. Such change was autr	atutes, the abovi orized by the co	e na orpor	imed corpo ration's boa	ration submits this statement for the pur ard of directors. Thereby accept the appi	pose of cha pintment as	anging it register	s registered office   red agent Tann
raitillat Wi	th, and accept the obligations of	. Section 607.0505, Florida Stati	utes.						_
SIGNATURE .	Signature: Specific process numeral registers	ed agreemants little di approcabile	INCITE RELIGIONS LA	april 1	Self - Korny By Quire	Lishen territ timb	DAJĒ		
12.	OFFICE R	S AND DIRECTORS	13.		<u>.</u>	ADDITIONS/CHANGES TO OFF		DIREC	10RS IN 12
TITLE	0	☐ DELETE	1 1 114	1 1 TIFLE				] Chang	nc tibbA 🔲 ag
NAME	TILUS, W F 571 E. 1ST ST.		1.2 NAM	1.2 NAME					
STREET ADDRESS	PAHOKEE FL 33476		1.3 STREET ADDRESS		DORESS				
CITY-S1-2IF	l -	•			ZIP				
₹ITL€	CONLEY, ADA B	2 1 TIT.	.f				]] Chang	ië 🔲 Addition	
NAME	13600 S.W. CONNERS	LIMV	2 2 NA						
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NAME			4.2 NAV						
STREET ADDRESS			4.3 STR		1				
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NAME		Finerest	5 1 Jill				L	] Chang	€ ☐ Addition
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NAME			6.2 NAM				L	] Chang	e 🗀 Addition
STREET ADDRESS					DENOCOC				
			6 3 STR		i				
CITY - ST - ZIP	L		6.4 CITY	- 51-	ZIP				

14. I do hereby certify that the information supplied with this filing is vocuntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 13 if changed, or on an attachment with an address

SIGNATURE:

ADA BUSH COLLY ADA BUSH C SIGNATURE AND TYPED OR PRINTED NAME OF SKNING OFFICER OR DIRECTOR

ADA BUSH CONLEY

4/20/96

 $\mathsf{Date}$ 

407-924-5651

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