

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P93000068452 (0)

1. Corporation Name

WATER WORKS OF SOUTHWEST FLORIDA, INC.



Principal Place of Business

532 SE 47TH TERRACE  
CAPE CORAL FL 33904

Mailing Address

532 SE 47TH TERRACE  
CAPE CORAL FL 33904

2. Principal Place of Business

21

Suite, Apt., etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt., etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

ROOSA, RICHARD V.S.  
1714 CAPE CORAL PARKWAY  
CAPE CORAL FL

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 607.032 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 607.030, Florida Statutes.

SIGNATURE

Signature of the person who signed this statement for the corporation

Signature of the Agent who signed this statement for the corporation

DATE

12. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

D

JACKSON, DAWN  
532 S.E. 47TH TERRACE  
CAPE CORAL FL 33904

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE  
2. NAME  
3. STREET ADDRESS  
4. CITY-STATE-ZIP

Change Addition

5. TITLE  
6. NAME  
7. STREET ADDRESS  
8. CITY-STATE-ZIP

Change Addition

9. TITLE  
10. NAME  
11. STREET ADDRESS  
12. CITY-STATE-ZIP

Change Addition

13. TITLE  
14. NAME  
15. STREET ADDRESS  
16. CITY-STATE-ZIP

Change Addition

17. TITLE  
18. NAME  
19. STREET ADDRESS  
20. CITY-STATE-ZIP

Change Addition

21. TITLE  
22. NAME  
23. STREET ADDRESS  
24. CITY-STATE-ZIP

Change Addition

800001772448  
-04/08/96--01054--012  
\*\*\*200.00

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)(k), Florida Statutes. Further, I 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 treasurer 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:

*Dawn Jackson* President  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/25/96

(941) 540-0054

CR2E034 (12/95)