

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 19 AM 9:31

DOCUMENT # **P94000043969 (2)**

1. Corporation Name

WATER & SEWER COLLECTION SERVICES, INC.

Principal Place of Business

**701 WEST FLETCHER AVENUE
STE. A
TAMPA FL 33612**

Mailing Address

**701 WEST FLETCHER AVENUE
STE. A
TAMPA FL 33612**

DO NOT WRITE IN THIS SPACE

3. Date incorporated or qualified

06/03/1994

3a. Date of last report

4. FEI Number

59-3257034

Applies For

☐ 1st Application

\$8.75 Additional
Fee Required

2. Principal Place of Business

21

2a. Mailing Address

26

22. City & State

23

27. City & State

28

Zip

Country

Zip

Country

24

25

29

30

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for interstate tax under the Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**SCHOFIELD, RICHARD
701 WEST FLETCHER AVENUE
STE. A
TAMPA FL 33612**

81. Name

82. Street Address (P.O. Box Number is fine, if applicable)

83

84. City

FL

85. State

11. Pursuant to the provisions of Sections 607.0432 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, officers, or both, and the appointment of the new registered agent is familiar with, and accept the obligations of, Section 607.0432, Florida Statutes.

SIGNATURE

Signature of Registered Agent or Corporation Secretary (if applicable)

Signature of New Registered Agent (if applicable)

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

TITLE

D

NAME

**SCHOFIELD, RICHARD
936 QUISANDO DEAVILA
TAMPA FL 33613**

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

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STREET ADDRESS

CITY, ST, ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard D. Schofield

1/10/95

813 963-3500