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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000052016 (0)

CRYSTAL CLEAR SPRING WATER CORP.				
Principal Place	o of Buchass	Mailing Address		
				· · · · · · · · · · · · · · · · · · ·
665 N. COUNTRY CLUB DR. P.O. BOX 578 CRYSTAL RIVER FL 34429 CRYSTAL RIVER FL 34423-057			423-0578	
{		• • • • • • • • • • • • • • • • • • • •		DO NOT WRITE IN THIS SPACE
				3. Date incorporated or Qualified
A Driveted D	lone of Divisiones	Los Mailios Address		07/06/1994
<u> </u>	lace of Business	2a. Mailing Address		4. FEI Number Applied For
Suite, Apt.	# etc	Suite, Apt. #, etc.		59-3255422 Not Applicable
22	, 4.6.	27		5. Certificate of Status Desired Fee Required
City & State	9	City & State		6. Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24	25	29	30	Personal Property Tax due June 30. Yes No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent
LEWIS, STANLEY F			81 Name	
665 N. COUNTRY CLUB DR.			82 Street	Address (P.O. Box Number is Not Acceptable)
CR	YSTAL RIVER FL 34429		<u> </u>	
			83	;
Í			84 City	85 Zip Code
		1 227 1 220 1 21 2 2 2		FL 2 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
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.				
agent, I a	m familiar with, and accept the obliga	tions of, Section 607.0505, F	Florida Statutes.	
SIGNATURE	Signature, typed or printed name of registered agen	a cond title if a collection (6)	OTE, Registered Agent signature	required when reinstating) DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	LEWIS, STANLEY F		1.2 NAME	
STREET ADDRESS	665 N. COUNTRY CLUB BLVD	•	1.3 STREET ADDRESS	
CITY-ST-ZIP	CRYSTAL RIVER FL 34429		1.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	2.1 TITLE	Change Addition
NAME	Lewis, shellie n		2.2 NAME	
STREET ADDRESS	665 N. COUNTRY CLUB BLVD		2.3 STREET ADDRESS	
CITY - ST - ZIP	CRYSTAL RIVER FL 34429		2. 4 CITY-ST-ZIP	
TITLE	D	DELETE	3,1 TITLE	Change Addition
NAME	LEWIS, CHARLES W		3.2 NAME	
STREET ADDRESS	8114 COUNTY RD. 6420		3.3 STREET ADDRESS	
CITY-ST-ZIP	LUBBOCK TX 79416	T Sri Fre	3.4. CITY-ST-ZIP	later True
TITLE	D	☐ DELETE	4.1 TITLE	L_1 Change L_1 Addition
NAME	LEWIS, MARCIA J		4. 2 NAME	
STREET ADDRESS	8114 COUNTY RD. 6420		4.3 STREET ADDRESS	•
CITY-ST-ZIP TITLE	LUBBOCK TX 79416	☐ DELETE	4.4 CNY-ST-ZIP 5.1 TITLE	Change Addition
NAME		FT percie	5.1 MILE 5.2 NAME	C Change Mountly
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			■ t	
TITLE		DELETE	5.4 CITY - ST - ZIP 6.1 TITLE	☐ Change ☐ Addillon
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

I hereby certify that the information supplied with this filling 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 a podress.

SIGNATURE:

352 795 9418

FILED

Feb 02 1998 8:00am

Secretary of State