

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

DOCUMENT # P94000076118 (6)

1. Corporation Name

CONTRACT DEWATERING, INC.

30 MAY 11 AM 10:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
18223 JUPITER LANDINGS DR
JUPITER FL 33458

Mailing Address
18223 JUPITER LANDINGS DR
JUPITER FL 33458

DO NOT WRITE IN THIS SPACE

3. Date of Incorporation or Organization	3a. Date of Last Report
10/17/1994	
4. FEI Number	Applied For Not Applicable
65-0533473	
5. Certificate of Status Desired	☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	☐ \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under § 199.032, Florida Statutes.	☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21. State Apt. # etc.	26. State Apt. # etc.
22. City & State	27. City & State
23. City & State	28. City & State
24. City & State	29. City & State
30. City & State	31. City & State

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
NEWHALL, COLLEEN N 120 N US HWY ONE SUITE 200 TEQUESTA FL 33469	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 602, 603, and 604, Florida Statutes, the above named corporation hereby makes the statement for the purpose of changing its registered office or registered agent in the State of Florida. Such change was authorized by the corporation's board of directors, thereby accept the appointment as registered agent. I am familiar with and accept the provisions of Sections 602, 603, and 604, Florida Statutes.

SIGNATURE

(Signature of Officer or Director)

(Signature of Registered Agent)

12. OFFICERS AND DIRECTORS	13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME D STEVENS, KEVIN 18223 JUPITER LANDINGS DR JUPITER FL 33458	1. NAME 2. NAME 3. STREET ADDRESS 4. CITY, ST. ZIP 5. NAME 6. STREET ADDRESS 7. CITY, ST. ZIP 8. NAME 9. STREET ADDRESS 10. CITY, ST. ZIP 11. NAME 12. STREET ADDRESS 13. CITY, ST. ZIP 14. NAME 15. STREET ADDRESS 16. CITY, ST. ZIP 17. NAME 18. STREET ADDRESS 19. CITY, ST. ZIP 20. NAME 21. STREET ADDRESS 22. CITY, ST. ZIP

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for this exemption stated in Section 199.032(4)(b), Florida Statutes. I further certify that the information included 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 this corporation or the recipient of the information provided to me to file this report as required by Chapter 199, Florida Statutes, and that my name appears on Block 1, or Block 13, if changed, or on an attachment with an address.

SIGNATURE: *Kevin J. Stevens*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
KEVIN J. STEVENS
5/8/95
407-55177
407-55177
407-55177