

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 JUN -6 PM 3:26

DOCUMENT # P95000027896

1. Corporation Name

Florida Water Authority, Inc.

2. Principal Office Address (New)

8725 Dusty Lane

Suite, Apt. #, etc.

City & State

New Port Richey, FL

Zip

34655-1001

Country

USA

3. Mailing Office Address

same

Suite, Apt. #, etc.

City & State

REINSTATEMENT 916-01

**4. Date Incorporated or Qualified
To Do Business in Florida**

04/07/1995 SP

5. FEI Number

none

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

**\$8.75 Additional Fee required
for a Certificate of Status**

7. Name and Address of Current Registered Agent

Name

Joel R. Tew, Esquire

Street Address (P.O. Box Number is Not Acceptable)

Tew, Barnes & Atkinson, L.L.P.

Suite, Apt. #, Etc.

2655 McCormick Drive

City

Clearwater

State

FL

Zip Code

33759

600004435266-8

-06/21/01--01050--023

*****1500.00 ***1500.00**

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date **5/31/01**

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D/P	George M. Brown	8811 Dusty Lane	New Port Richey, FL 34655
D/VP	Bill Ockunzzi	2707 1st Street, Suite 1	Indian Rocks Beach, FL 33785
D/T	Peter Schreuder	110 W. Country Club Drive	Tampa, FL 33612
D/S	Joel R. Tew	2655 McCormick Drive	Clearwater, FL 33759

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Joel R. Tew, Secretary

5/31/01 (727) 799-2882

Date

Daytime Phone #

CR2E081 (6/00)