**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P96000040324

1. Corporation Name

CREATIVE WATER CONCEPTS, INCORPORATED

Principal Place o	f Busine
2022 SAN MARCO	BLVD
JACKSONVILLE FL	32207

Mailing Address

2022 SAN MARCO BLVD

## **FILED** Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90021 028 \*\*\*150.00



JACKSONVILLE	FL 32207	JACKSONVILLE FL 32207	DO NOT WRITE IN THIS SPACE		
US		US		3. Date Incorporated or Qualifed	
				05/06/1996	
2 Principal Pla	ace of Business	2a. Mailing Address		4. FEI Number Applied For	
	St. Augustine Rd	26 P.O. Box 47	7341	59-3439883 Not Applicable	
Suite, Apt.	# etc	Suite, Apt. #, etc.		_ \$8.75 Additional	
22	, , , , ,	27		5. Certificate of Status Desired Fee Required	
City & State		City & State		6. Election Campaign Financing 55.00 May Be	
Zip Country Zip Country 8. This corporation owes the current year Intangible					
24 7220	7 <sub>25</sub> υŠΑ	29 32247-7347 30	USA	Personal Property Tax.	
241 2	9. Name and Address of Current			10. Name and Address of New Registered Agent	
	Name Richard E McCan Jr				
KIRC	HER, SALLY J ESQ		93 Street A	ddress (P.O. Box Number is Not Acceptable)	
(62) Street Address (F.O. Box Number is Not Appellate)				215 San Jose Riva	
Suiti	e 3303 one independent driv	E	83		
JACK	(SONVILLE FL 32202		Ħ	106   as   7   Code	
			84 City T	FL 85 Zip Code 322 07	
44 Dureuant I	to the provisions of Sections 607 0502	and 607.1508. Florida Statutes.	the above-named c	perpending submits this statement for the purpose of changing its registered	
office or re	egistered agent, or both, in the State of	Florida. Such change was auth	orized by the corpor	ration's board of directors. I hereby accept the appointment as registered	
agent. I ar	m familiar with, and accept the obligation	ons ar, Section 607.0505, Florida		Frasident 4-19-99	
SIGNATURE/	Manual Col	and title if applicable. (NOTE: Re	edistered Agent signature rec	Quired when reinstating)  Ar-zsideat 4-19-99  DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	☐ DELETE		PTSC Change Addition	
NAME	MCCANN, RICHARD E	_		McCann, Jr., Richarl E.	
\$ <b> </b>	5215 SAN JOSE BLVD #106		1.3 STREET ADDRESS	it com, or, kicker co.	
STREET ADDRESS	JACKSONVILLE FL		1.4 CITY-ST-ZIP		
CTTY-ST-ZIP	JACKSONVILLE FL	☐ DELETE	2.1 TITLE	Change Addition	
TITLE					
NAME			2.3 STREET ADDRESS	McCana Sally 2724 Aliva do Ave	
STREET ADDRESS	•		2.3 STREET ADDRESS	T ( 2 211 27 27267	
CITY-ST-ZIP		G as sw		Jacksonville (=L 322\$7)	
TITLE		☐ DELETE	3.1 TITLE		
NAME ]				McCana Richard E	
STREET ADDRESS			3.3 STREET ADDRESS	2774 Alveredo Ave	
CITY-ST-ZIP			3.4. CITY-ST-ZIP	Jacksonville FL 32217	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition	
NAME			4, 2 NAME		
STREET ADDRESS		<u> </u>	4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE .		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition	
NAME			5.2 NAME		
STREET ADORESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZiP		
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition	
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
1 1			6.4 CITY-ST-ZIP		
CITY-ST-ZIP					

14. I hereby certify that the information supplied with this filing 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 an address, with all other like empowered.

SIGNATURE:

McCen Jr 4-19.99