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 # P96000076146 (5)

RITCHIE WATER WORKS, INC.

FILED Apr 27 1998 8:00am Secretary of State



Principal Place of Business 22 BAY VIEW DRIVE ST. AUGUSTINE FL 32095 2. Principal Place of Business 2. Principal Place of Business 2. Suite, Apt. #, etc.					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/12/1996 4. FEI Number 59-3402370 Applied For Not Applicable	
22 Sur	TE E	27 City & State			Certificate of Status Desired Status Companies Figure 1999	Fee Required
23 St. A	lus. FL.	28 Zip	Cou	ntry	B. Election Campaign Financing Trust Fund Contribution This corporation owes or has paid to	7.0000.01000
24 3708	86 25 St. Johns		30	 -	Personal Property Tax due June 30 10. Name and Address of New Regist	Yes 🔲 No
22	CHIE, DAVID S BAY VIEW DRIVE AUGUSTINE FL 32095			 81 Name 82 Street Add 83 84 City 	dress (P.O. Box Number is Not Acceptable)	FL 85 Zip Code
SIGNATURE	to the provisions of Sections 607 0500 egistered agent, or both, in the State of familiar with, and accept the obligation of the state of the section of the sec	and tille it applicable (NC	DTE Registered		,	ose of changing its register appointment as register
12.	OFFICERS AND	· · · · · · · · · · · · · · · · · · ·	13,		ADDITIONS/CHANGES TO OFFICER	
TITLE NAME	RITCHIE, DAVID S	☐ DELETE	1.1 1(1	- 1		Change Ad
STREET ADDRESS	22 BAY VIEW DRIVE		1.2 NA	REET ADDRESS		
CITY-ST-ZIP	ST. AUGUSTINE FL 32095			IY-ST-ZIP		
TITLE	0	DELETE	2111			☐ Change ☐ Ad
NAME	RITCHIE, BETH E		2.2 NA	1		
STREET ADORESS	22 BAY VIEW DRIVE			REET ADDRESS		
CITY-ST-ZIP	ST. AUGUSTINE FL 32095		1	TY-ST-ZIP		
TITLE		☐ DELETE	3.1 TIT			Change Ad
NAME			3.2 NA	ME		
STREET ADDRESS			3.3 \$1	reet address		
CITY-ST-ZIP				TY-\$T-ZIP		
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NAME			4.2 N	t		
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NAME		L DELETE	1	· 1		C Analige C At
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				REET ADDRESS		
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NAME			6.2 NA	J		الما ما ما ما
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP				I .		
	ertily that the information supplied wit	h this filing does not qualify		Y-ST-ZIP	in Section 119.07(3)(i), Florida Statutes. I furt	her certify that the informa

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 attendment with an address.

1-16-98

204-824-0462