

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000037910

1. Entity Name

MCLEOD GARDENS WATER CO., INC.

R

**FILED**  
**Jul 21, 2000 8:00 am**  
**Secretary of State**

07-21-2000 90002 028 \*\*\*150.00

Principal Place of Business

277 MAGNOLIA AVENUE, S.W.  
WINTER HAVEN FL 33880

Mailing Address

277 MAGNOLIA AVENUE, S.W.  
WINTER HAVEN FL 33880

2. Principal Place of Business

616 2nd Street, S.W.

3. Mailing Address

P. O. Box 2898

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Winter Haven, FL 33880

City & State

Winter Haven, FL

4. FEI Number

59-3466486

Applied For

Not Applicable

Zip

33880

Country

USA

Zip

33883

Country

USA

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

VAUGHN, JAMES O  
277 MAGNOLIA AVENUE, S.W.  
WINTER HAVEN FL 33880

Name

Street Address (P.O. Box Number is Not Acceptable)  
616 2nd Street, S.W.

City

Winter Haven

FL

Zip Code  
33880

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VAUGHN, JAMES O		NAME	
STREET ADDRESS	277 MAGNOLIA AVENUE, S.W.		STREET ADDRESS	616 2nd Street, S.W.
CITY-ST-ZIP	WINTER HAVEN FL 33880		CITY-ST-ZIP	Winter Haven, FL 33880
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GERRARD, KENNETH M		NAME	
STREET ADDRESS	105 SPYGLASS		STREET ADDRESS	
CITY-ST-ZIP	ST. SIMONS ISLAND GA		CITY-ST-ZIP	
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME	
STREET ADDRESS			STREET ADDRESS	
CITY-ST-ZIP			CITY-ST-ZIP	
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME	
STREET ADDRESS			STREET ADDRESS	
CITY-ST-ZIP			CITY-ST-ZIP	
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME	
STREET ADDRESS			STREET ADDRESS	
CITY-ST-ZIP			CITY-ST-ZIP	
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME	
STREET ADDRESS			STREET ADDRESS	
CITY-ST-ZIP			CITY-ST-ZIP	

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/10/00

Date

863 293-2577

Daytime Phone #

CR2E034 (5/00)

D#P9700037910  
000712461  
Attachment

**MCLEOD WATER COMPANY INC.**

P. O. Box 2898  
Winter Haven, FL 33883-2898  
863-293-2827

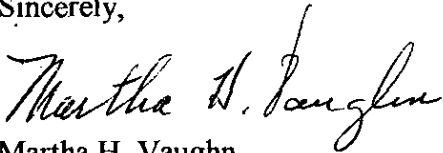
July 10, 2000

Florida Dept. of State  
Division of Corporation  
P. O. Box 6327  
Tallahassee, FL 32314

RE: 2000 Uniform Business Report  
FEI 59-3466486

Per our telephone call today, enclosed is our check for \$150.00 for the 2000 Uniform Business Report filing. We never received the first notice for filing.

Sincerely,



Martha H. Vaughn  
McLeod Gardens Water Company Inc.