FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00		
CORFORATION ANNUAL REPORT Secreta 1999 DIVISION OF	RTMENT OF STATE Ine Harris Iny of State CORPORATIONS	APTROVED FILED
DOCUMENT # P970000 42238		S9 00T 26 PM 2: 33
Watts Holdings Inc.		SECRETARY OF STATE TALLAHASSEE, FLORIDA
2320-4 North Monrol St. For apa Dare of Business, Mailing Address Tallahrasa, Pl. 32303		
7000000		DO MOT WEITZ W. T. W. CO. C.
1		DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified
		5-13-97
2 Principal Place of Business 2a. Mailing Address		4. FEI Number Applied For
21 26		59395 9/7 Not Applicable
Suite A;t #, etc. Suite, Apt #, etc. 27		5. Certificate of Status Desired \$8.75 Additional Fee Required
City & State City & State 23 28		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip Country Zip 24 25 29	Country 30	8. This corporation owes the current year Intangible Personal Property Tax.
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent
Prul V. Watte	81 Name	
faul V. Walts 8888 Salfronte G. Tall. 17.2223	82 Street Addr	ess (P.O. Box Number is Not Acceptable)
8888 200 200 200	83	
1 acc. 1 (32)	83	
	84 City	FL 85 Zip Code
 Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statute office or registered agent, or both in the provision of Florida. Such change was at agent. Lam familiar with, and a section of section 607,0505, Florida. 	es, the above-named corporation uthorized by the corporation rida Statutes.	oration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered
SIGNATURE		10/29/99
Step date, typed of anded name of Registered agent and title if applicable (NOTE) 12. OFFICERS AND DIRECTORS	Registered Agent signature required 13.	
The District	1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change
Paul V. Walt	1.2 NAME	
1401. Malv. Wath SHALLANDERS Some on above	1.3 STREET ADDRESS	
	1.4 CITY-ST-ZIP	
14.F	2 1 TITLE	☐ Change ☐ Addition
\$275	2.2 NAME	
Steet #000:55 On:5-76	2.3 STREET ADDRESS	<u>†</u>
T. DELETE	2 4 CITY-ST-ZIP 3.1 TITLE	☐ Change ☐ Addition
NAC	3.2 NAME	
Sire LATORESS	33 STREET ADDRESS	
C(1) (\$1-Z)(2)	34. CITY-ST-ZIP	
□ DELETE	4.1 TITLE	5000030254 State - DAdgiton
NAME OF THE PROPERTY OF THE PR	4.2 NAME	-10/26/9901057007
STELL MODERNS CONSTITUTE	4.3 STREET ADDRESS	****158.75 ****158.75
TOLE [] DELETE	4.4 CITY-ST-ZIP 51 TITLE	Change Addition
AMS	5.2 NAME	

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

64 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 trust enhancement 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 trust enhancement 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 trust enhancement 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 trust enhancement 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 trust enhancement and accurate and that my signature shall have the same legal effect as if under oath; that I am an officer or director of the corporation or the receiver or trust enhancement and accurate and that my signature shall have the same legal effect as if under oath; that I am an officer or director of the corporation or the receiver or trust enhancement and the same legal effect as if under oath; that I am an officer or director of the corporation o SIGNATURE:

TOLE NAME: 5460 F (ADDR) 88

CITY-ST-ZIF

STREET ADDRESS 011-S1-ZP

Tille

NAME

SIGNATURE AND TYPES OR PRINT O NAME OF SIGNING OFFICER OR DIRECTOR

[] DELETE

Daytime Phone #

Addition

Change