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 # P97000083874 (2)

MUNICIPAL COMMERCIAL INDUSTRIAL SEWER SERVICE, I NC.

FILED May 19 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					* : **********************************		111 14917 9181 1981	
	AVE., OFFICE 2	P. O. BOX 705						
LIVE OAK FL 32080		LIVE OAK FL 32064	LIVE OAK FL 32064		DO NOT WE	DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifi			
					09/26/1997			
2. Principal Pla	ace of Business	2a, Mailing Address			4. FEI Number	<u>بر</u>	Applied For	
21		26			59.3486145		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	7	75 Additional se Regulred	
City & State		City & Stato			a Flaction Compaign Financia	- -		
23		28			 Election Campaign Financin Trust Fund Contribution 		.00 May Be ded to Fees	
Zip			Country		a. This corporation owes or ha	s paid the current year	ar Intangible	
24	25	29	30			Personal Property Tax due June 30.		
	g. Name and Address of Currer	nt Registered Agent			10. Name and Address of New	Registered Agent		
	DŴIN, DONALD G		11	81 Name	-			
1525 \$. OHIO AVE., OFFICE 2				82 Street	Address (P.O. Box Number is Not Acce	ptable)		
LIVE OAK FL 32080			ļ.	83				
				83				
			[84 City		FL 85	Zip Code	
11, Pursuant to	o the provisions of Sections 607.050	02 and 607.1508. Florida Sta	tutes, the ab	ove-named	corporation submits this statement for t	he purpose of chang	ing its registered	
office or re	egistered agent, or both, in the State	of Florida, Such change wa	s authorized	by the corp	corporation submits this statement for to poration's board of directors. I hereby a	ccept the appointmen	nt as registered	
	n tapmilar with, and accept the oblig	anona or, accion our book,	r ionua otate	noa.				
SIGNATURE	Signature, typed or printed name of registered age	on and title if applicable (f	NOTE Registered	Agont signature	required when reinstating)	DATE		
12,		D DIRECTORS	13.		ADDITIONS/CHANGES TO O			
TITLE	D DIAME DONALD O	☐ DELETE	1.1 TiTi			☐ Cha	ange L Addition	
NAME	BALDWIN, DONALD G		1.2 NA/					
STREET ADDRESS	P. O. BOX 705 LIVE OAK FL 32064			REET ADDRESS			Į.	
CITY-ST-ZIP			1.4 CIT 2.1 TITI	Y-ST-ZIP		Chi	ange Addition	
TITLE NAME	HIGGINS, WILLIAM A JR.	Land Decert	2.1 101 2.2 NA					
STREET ADDRESS	\$821 SPRUCE DR.			REET ADDRESS				
CITY-ST-ZIP	VALDOSTA GA 31605			IY-ST-ZIP			İ	
TITLE		DELETE	3.1 THT			☐ Cha	ange Addition	
NAME			3.2 NA	ME				
STREET ADDRESS			3.3 STF	REET ADDRESS				
CITY-ST-ZIP			3.4. Cit	ry-st-zip				
TITLE		☐ DELETE	4.1 TIT	LE		Ch:	ange 🔲 Addition	
NAME			. 4.2 NA	ME				
STREET ADDRESS			4.3 STF	REET ADDRESS			<u> </u>	
CITY-ST-ZIP				Y-ST-ZIP		T 06	17 4444	
TITLE		☐ DELETE	5.1 TIT			☐ Ch	ange 🔲 Addition	
NAME			5.2 NAI					
STREET ADDRESS				REE1 ADDRESS				
CITY-ST-ZIP		DELETE		Y-ST-ZIP		Ch	ange Addition	
TITLE			6.1 T(I			()II	mer C Monton	
NAME OTOTET ADDRESS			6.2 NAI	ME REET ADDRESS				
STREET ADDRESS								
City-St-ZiP	ertify that the information supplied v	vith this filing does not qualit		Y-ST-ZIP mption state	Led in Section 119.07(3)(i), Florida Statut	es. I further certify the	at the information	

indicated on this annual report or supplemental amount of some partial 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 exporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statules; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an oddress.

5/1/08