way water

PROFIT CORPORATION ANNUAL REPORT

1999



## FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DΙΛ	/ISK	NC	OF	COF

## FILED Apr 06, 1999 8:00 am Secretary of State

04-06-1999 90034 047 \*\*\*150.00

= -32

**■** ': ::

1. Corporation TATANK		00001	2665						
Principal Plac	n of Business	M	alling Address			I E <b>rkijor</b> z er <b>s</b> (Oldt iftelt <b>ob</b> tit dans entil a	INSTITUTUUM SANSON NEVINSI I	IX(T) OHY SOOP	
12			83 SOUTH HWY 17-92						
1563 SOUTH H LONGWOOD FL			NGWOOD FL 32750			·			
	- 40,00					DO NOT WRITE IN 1	HIS SPACE	<del></del>	
						3. Date Incorporated or Qualifed		J	
						02/09/1998		olled For	
2. Principal P	2. Principal Place of Business 2a. Mailing Addre		. Maiting Address	Address		4. FEI Number - 349 1852	8 H	Applicable	
21		26]	0 11 4-4 41 -42		_	31 3111000	\$8.75 A		
Suite, Apt.	. #, etc.	<del>                                     </del>	Suite, Apl. #, etc.			5. Certificate of Status Desired	. Fee Re		
22	<u> </u>	27	City & State			6. Election Campaign Financing	\$5.00		
City & Stat			City & Guite			Trust Fund Contribution	Added to	•	
23 Zin	28 Zin		Zip	Country		8. This corporation owes the current year intangible			
Zip	<u> </u>				Personal Property Tax.				
24	9. Name and Address of			<del>-</del> 1		10. Name and Address of New Registe	red Agent		
				81	Name			ļ	
MCF	RAE, THOMAS GREGORY	•		82	Stanna A	ddress (P.O. Box Number is Not Acceptable)			
1500	O PARK DRIVE			02	Suger	entities (F.G. EQX (sufficer to 140) recolution)			
CAS	SSELBERRY FL 32707			83			<u></u>		
			•	(			85 Zip C	orde	
				84			File (**)	1	
			, 00000, 000,0000, 0000						
SIGNATURE	Signature, typed or printed name of re-	gletared agent and title	Fappicable. (NOTE: R	Registered Ager		corporation submits this statement for the purposition's board of directors. I hereby accept the a	<u> </u>		
12.	Signature, typed or printed name of re-		if applicable. (NOTE: R	Agistared Ages		Quined when reinstating) DAT ADDITIONS/CHANGES TO OFFICER	E S AND DIRECTO		
12.	Signature, typed or printed name of re-	gletared agent and title	Fappicable. (NOTE: R	13.		ADDITIONS/CHANGES TO OFFICER  President Director	<u> </u>		
12. TITLE NAME	Signature, typed or printed name of re OFFIG	gletared agent and title	if applicable. (NOTE: R	13. 1.1 TITLE 12 NAME	nt signature fa	ADDITIONS/CHANGES TO OFFICER  President / Director  Thomas Gregory McKae	E S AND DIRECTO		
12. TITLE NAME STREET ADORESS	Signature, typed or printed name of re OFFIG	gletared agent and title	if applicable. (NOTE: R	13. 1.1 TITLE 12 NAME 13 STREET	nt signature ra	ADDITIONS/CHANGES TO OFFICER  President / Director  Thomas Gregory McRae  1500 park Dilbe	E S AND DIRECTO		
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of re OFFIG	gletared agent and title	if applicable. (NOTE: R ECTORS DELETE	13. 1.1 TITLE 12 NAME 13 STREET	nt signature ra	ADDITIONS/CHANGES TO OFFICER  President / Director  Thomas Gregory McRae  1500 Park Dille  Caselborn, PL 32707	E S AND DIRECTO	RS IN 12	
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of re OFFIG	gletared agent and title	if applicable. (NOTE: R	13. 1.1 TITLE 12 NAME 13 STREE 1.4 CITY-S 2.1 TITLE	nt signature ra	ADDITIONS/CHANGES TO OFFICER  President / Director  Thomas Gregory McRae  1500 Park Dille  Caselbery, PL 32707  See/Treas / Director	E S AND DIRECTO	RS (N 12	
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed here of re- OFFI(	gletared agent and title	if applicable. (NOTE: R ECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME	T ADDRESS	ADDITIONS/CHANGES TO OFFICER  President / Director  Thomas Gregory McRae  1500 park Dille  Cascelbory, PL 32707  Sec Treas / Director  Cynthia B. McRae	E S AND DIRECTO	RS (N 12	
TILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed here of re- OFFI(	gletared agent and title	if applicable. (NOTE: R ECTORS DELETE	13. 1.1 TITLE 12 NAME 13 STREE 1.4 CITY-S 2.1 TITLE 22 NAME 2.3 STREE	T ADDRESS	ADDITIONS/CHANGES TO OFFICER  President / Director  Thomas Gregory McRae  1500 Park Dille  Cascelbery, PL 32707  Sec / Treas / Director  Cynthia B. McRae  1500 park Drive	E S AND DIRECTO	RS (N 12	
12. TITLE NAME STREET ADDRESS CITY-ST-2P TITLE NAME STREET ADDRESS CITY-ST-2P	Signature, typed or printed here of re- OFFI(	gletared agent and title	if applicable. (NOTE: R ECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME	T ADDRESS	ADDITIONS/CHANGES TO OFFICER  President / Director  Thomas Gregory McRae  1500 park Dille  Cascelbory, PL 32707  Sec Treas / Director  Cynthia B. McRae	E S AND DIRECTO	RS (N 12	
12.  TITLE  NAME  STREET ADDRESS  CITY-ST-2P  TITLE  NAME  STREET ADDRESS  CITY-ST-2P  TITLE	Signature, typed or printed here of re- OFFI(	gletared agent and title	V applicable (NOTE: R ECTORS DELETE	13. 1.1 TITLE 12 NAME 13 STREET 14 CITY-S 2.1 TITLE 22 NAME 23 STREET 2.4 CITY-S	T ADDRESS	ADDITIONS/CHANGES TO OFFICER  President / Director  Thomas Gregory McRae  1500 Park Dille  Cascelbery, PL 32707  Sec / Treas / Director  Cynthia B. McRae  1500 park Drive	E S AND DIRECTO Change	RS IN 12 Addition	
12. TITLE NAME STREET ADDRESS CITY-ST-2P TITLE NAME STREET ADDRESS CITY-ST-2P TITLE NAME	Signature, typed or printed here of ne OFFI(	gletared agent and title	V applicable (NOTE: R ECTORS DELETE	13. 1.1 TITLE 12 NAME 13 STREE 1.4 CITY-S 2.1 TITLE 22 NAME 23 STREE 2.4 CITY-S 3.1 TITLE 32 NAME	T ADDRESS	ADDITIONS/CHANGES TO OFFICER  President / Director  Thomas Gregory McRae  1500 Park Dille  Cascelbery, PL 32707  Sec / Treas / Director  Cynthia B. McRae  1500 park Drive	E S AND DIRECTO Change	RS IN 12 Addition	
12. TITLE NAME STREET ADDRESS CITY-ST-2P TITLE NAME STREET ADDRESS CITY-ST-2P TITLE NAME STREET ADDRESS STREET ADDRESS	Signature, typed or printed here of ne OFFI(	gletared agent and title	V applicable (NOTE: R ECTORS DELETE	13. 1.1 TITLE 12 NAME 13 STREE 1.4 CITY-S 2.1 TITLE 22 NAME 23 STREE 2.4 CITY-S 3.1 TITLE 32 NAME	T ADDRESS T ADDRESS T ADDRESS T ADDRESS	ADDITIONS/CHANGES TO OFFICER  President / Director  Thomas Gregory McRae  1500 Park Dille  Cascelbery, PL 32707  Sec / Treas / Director  Cynthia B. McRae  1500 park Drive	S AND DIRECTO Change  Change	RS IN 12 Addition Addition	
12. TITLE NAME STREET ADDRESS CITY-ST-2P TITLE NAME STREET ADDRESS CITY-ST-2P TITLE NAME	Signature, typed or printed here of ne OFFI(	gletared agent and title	V applicable (NOTE: R ECTORS DELETE	13. 1.1 TITLE 12 NAME 13 STREET 14 CITY-S 2.1 TITLE 22 NAME 23 STREET 2.4 CITY-S 3.1 TITLE 12 NAME 13 STREET 12 NAME 13 STREET 12 NAME 13 STREET 14 CITY-S 3.1 TITLE 12 NAME 13 STREET 15 NAME 13 STREET 15 NAME 13 STREET 15 NAME 15	T ADDRESS T ADDRESS T ADDRESS T ADDRESS	ADDITIONS/CHANGES TO OFFICER  President / Director  Thomas Gregory McRae  1500 Park Dille  Cascelbery, PL 32707  Sec / Treas / Director  Cynthia B. McRae  1500 park Drive	E S AND DIRECTO Change	RS IN 12 Addition	
12.  TITLE  NAME  STREET ADDRESS  CITY-ST-2P  TITLE  NAME  STREET ADDRESS  CITY-ST-2P  TITLE  NAME  STREET ADDRESS  CITY-ST-ZP  CITY-ST-ZP	Signature, typed or printed here of ne OFFI(	gletared agent and title	Proppicable (NOTE: R ECTORS DELETE DELETE	13. 1.1 ITILE 12 NAME 13 STREET 14 CITY-S 2.1 ITILE 22 NAME 23 STREET 2.4 CITY-S 3.1 ITILE 32 NAME 1.3 STREET 3.4 CITY-S 3.4 CITY-S 3.4 CITY-S 3.4 CITY-S 3.4 CITY-S 3.5 TREET 3.5 3.	T ADDRESS T ADDRESS T ADDRESS T ADDRESS	ADDITIONS/CHANGES TO OFFICER  President / Director  Thomas Gregory McRae  1500 Park Dille  Cascelbery, PL 32707  Sec / Treas / Director  Cynthia B. McRae  1500 park Drive	S AND DIRECTO Change  Change	RS IN 12 Addition Addition	
12.  TITLE  NAME  STREET ADDRESS  CITY-ST-2P  TITLE  NAME  STREET ADDRESS  CITY-ST-2P  TITLE  NAME  STREET ADDRESS  CITY-ST-2P  TITLE	Signature, typed or printed here of re- OFFILE	gletared agent and title	Proppicable (NOTE: R ECTORS DELETE DELETE	13. 1.1 ITILE 12 NAME 13 STREET 14 CITY-S 2.1 ITILE 22 NAME 23 STREET 2.4 CITY-S 3.1 ITILE 32 NAME 13 STREET 3.4 CITY-S 4.1 ITILE 3.1 IT	T ADDRESS T ADDRESS T ADDRESS T ADDRESS ST ZIP	ADDITIONS/CHANGES TO OFFICER  President / Director  Thomas Gregory McRae  1500 Park Dille  Cascelbery, PL 32707  Sec / Treas / Director  Cynthia B. McRae  1500 park Drive	S AND DIRECTO Change  Change	RS IN 12 Addition Addition	
12.  TITLE  NAME  STREET ADDRESS CITY-ST-2P  TITLE  NAME  STREET ADDRESS CITY-ST-2P  TITLE  NAME  STREET ADDRESS CITY-ST-2P  TITLE  NAME  STREET ADDRESS STREET ADDRESS STREET ADDRESS	Signature, typed or printed here of re- OFFILE	gletared agent and title	Proppicable (NOTE: R ECTORS DELETE DELETE	13. 1.1 ITILE 12 NAME 13 STREE! 14 CITY-S 2.1 ITILE 22 NAME 23 STREE! 2.4 CITY-S 3.1 ITILE 32 NAME 33 STREE 34 CITY-S 4.1 ITILE 4.2 NAME	T ADDRESS T ADDRESS T ADDRESS T ADDRESS T ADDRESS	ADDITIONS/CHANGES TO OFFICER  President / Director  Thomas Gregory McRae  1500 Park Dille  Cascelbery, PL 32707  Sec / Treas / Director  Cynthia B. McRae  1500 park Drive	S AND DIRECTO Change  Change  Change	RS IN 12 Addition Addition	
12.  TITLE  NAME  STREET ADDRESS  CITY-ST-2P  TITLE  NAME  STREET ADDRESS  CITY-ST-2P  TITLE  NAME  STREET ADDRESS  CITY-ST-2P  TITLE  NAME  NAME  NAME	Signature, typed or printed here of re- OFFILE	gletared agent and title	Proppicable (NOTE: R ECTORS DELETE DELETE	13. 1.1 ITILE 12 NAME 13 STREET 14 CITY-S 2.1 ITILE 22 NAME 23 STREET 2.4 CITY-S 3.1 ITILE 32 NAME 13 STREET 14.2 NAME 13 STREET 14.2 NAME 13.3 STREET 14.2 NAME 13.3 STREET 14.2 NAME 13.3 STREET 14.2 NAME 14.3 STREET 14.3	T ADDRESS T ADDRESS T ADDRESS T ADDRESS T ADDRESS	ADDITIONS/CHANGES TO OFFICER  President / Director  Thomas Gregory McRae  1500 Park Dille  Cascelbery, PL 32707  Sec / Treas / Director  Cynthia B. McRae  1500 park Drive	S AND DIRECTO Change  Change	RS IN 12 Addition Addition	
12. TITLE  NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed here of re- OFFILE	gletared agent and title	DELETE DELETE	13. 1.1 ITILE 12 NAME 13 STREE! 14 CITY-S 2.1 ITILE 22 NAME 23 STREE! 2.4 CITY-S 3.1 ITILE 32 NAME 3.3 STREE 3.4 CITY-S 4.1 ITILE 4.2 NAME 4.3 STREE 4.4 CITY-S	T ADDRESS T ADDRESS T ADDRESS T ADDRESS T ADDRESS	ADDITIONS/CHANGES TO OFFICER  President / Director  Thomas Gregory McRae  1500 Park Dille  Cascelbery, PL 32707  Sec / Treas / Director  Cynthia B. McRae  1500 park Drive	S AND DIRECTO Change  Change  Change	RS IN 12 Addition Addition	
12.  TITLE  NAME  STREET ADDRESS CITY-ST-2P  TITLE  TITLE  TITLE  TITLE  TITLE  TITLE  TITLE  TITLE	Signature, typed or printed harns of re- OFFIG	gletared agent and title	DELETE DELETE	13. 1.1 ITILE 12 NAME 13 STREE 14 CITY-S 21 ITILE 22 NAME 23 STREE 2.4 CITY-S 3.1 ITILE 12 NAME 13.5 STREE 4.1 ITILE 4.2 NAME 4.3 STREE 4.1 ITILE 52 NAME	T ADDRESS T ADDRESS T ADDRESS T ADDRESS T ADDRESS	ADDITIONS/CHANGES TO OFFICER  President / Director  Thomas Gregory McRae  1500 Park Dille  Cascelbery, PL 32707  Sec / Treas / Director  Cynthia B. McRae  1500 park Drive	S AND DIRECTO Change  Change  Change	RS IN 12 Addition Addition	
12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	Signature, typed or printed harns of re- OFFIG	gletared agent and title	DELETE  DELETE  DELETE	13. 1.1 ITILE 12 NAME 13 STREE 14 CITY-S 21 ITILE 22 NAME 23 STREE 24 CITY-S 3.1 ITILE 12 NAME 13 STREE 34 CITY-S 4.1 ITILE 4.2 NAME 4.3 STREE 4.4 CITY-S 5.1 ITILE 52 NAME 53 STREE 54 CITY-S	IT ADDRESS IT-ZIP IT ADDRESS	ADDITIONS/CHANGES TO OFFICER  President / Director  Thomas Gregory McRae  1500 Park Dille  Cascelbery, PL 32707  Sec / Treas / Director  Cynthia B. McRae  1500 park Drive	S AND DIRECTO Change Change Change	RS IN 12 Addition Addition Addition	
12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  STREET ADDRESS	Signature, typed or printed harns of re- OFFIG	gletared agent and title	DELETE DELETE	13. 1.1 ITILE 12 NAME 13 STREE 14 CITY-S 21 ITILE 22 NAME 23 STREE 24 CITY-S 3.1 ITILE 12 NAME 33 STREE 34 CITY-S 51 ITILE 52 NAME 53 STREE 54 CITY-S 6.1 ITILE	IT ADDRESS IT-ZIP IT ADDRESS	ADDITIONS/CHANGES TO OFFICER  President / Director  Thomas Gregory McRae  1500 Park Dille  Cascelbery, PL 32707  Sec / Treas / Director  Cynthia B. McRae  1500 park Drive	S AND DIRECTO Change  Change  Change	RS IN 12 Addition Addition	
12.  TITLE  NAME  STREET ADDRESS CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed harns of re- OFFIG	gletared agent and title	DELETE  DELETE  DELETE	13. 1.1 ITILE 12 NAME 13 STREE 14 CITY-S 21 ITILE 22 NAME 23 STREE 24 CITY-S 3.1 ITILE 12 NAME 4.2 NAME 4.3 STREE 4.4 CITY-S 5.1 ITILE 52 NAME 53 STREE 54 CITY-S 6.1 ITILE 52 NAME 53 NAME 53 NAME 54 CITY-S	IT ADDRESS IT-ZIP IT ADDRESS	ADDITIONS/CHANGES TO OFFICER  President / Director  Thomas Gregory McRae  1500 Park Dille  Cascelbery, PL 32707  Sec / Treas / Director  Cynthia B. McRae  1500 park Drive	S AND DIRECTO Change Change Change	RS IN 12 Addition Addition Addition	

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 suppliemental afinual 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 attraction of the corporation of the corp

SIGNATURE:

SUPPLIES REQUIRED TO SECULATIVE AND TYPED OR PRINTED HAME OF SECULAR OF FIGURE OF DESCRIPTION

FAR LS 49 407-696-449L

, ri