## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # P99000053944**

1. Entity Name

GATOR WATER ANALYSIS & TREATMENT, INC.



Principal Place of Business

12500 TAMIAMI TRAIL, SOUTH WARM MINERAL SPRINGS, FL 34287 Mailing Address

12500 TAMIAMI TRAIL, SOUTH WARM MINERAL SPRINGS, FL 34287

## FILED Jan 14, 2005 8:00 am Secretary of State

01-14-2005 90005 022 \*\*\*158.75



DO NOT WRITE IN THIS SPACE

01112005 No Chg-P		CR2E034 (10/03)	
4. FEI Number 65-0933808			Applied For
		Г	Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Daytime Phone #

6. Name and Address of Current Registered Agent				<b>!</b>	
PERRY, CLARE 12500 TAMIAMI TRAIL, SOUTH WARM MINERAL SPRINGS, FL 34287			DO NOT WRITE IN THIS SPACE		
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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  Signature, typed or printed named registered agent and title (printed bit).  (NOTE: Registered Agent signature required when reinstating)  DATE					
Fil. After M	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee Will be \$550.00	Election Campaign Finan     Trust Fund Contribution.	cing \$5.00 May Be Added to Fees	·	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECT D PERRY, JOHN 8222 ROCKWELL AVENUE NORTH PORT, FL 34286	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PERRY, CLARE 8222 ROCKWELL AVENUE NORTH PORT, FL 34286				
TITLE NAME STREET ADDRESS CITY-ST-2IP			_	NOT_WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN '	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				·	
12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, I turther certify that the information indicated on this report or supplemental report is true and facturate 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 10 or Block 11 it changed, or on an attachment with an address, with all other like empowered.					