SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S36075

(7)

AFTON BOTTLED WATER COMPANY

FILED Sep 02 1997 8:00am Secretary of State



Principal Place	e oi business	Mailing Address		ľ	4			
6380 METRO PLANTATION RD 6380 METRO PLANTATION RD			RD	ļ				
FORT MYERS FL 33912 US		FORT MYERS FL 33912 US		1	DO NOT WRITE IN THIS SPACE			
08		Uð		<u> </u>	3. Date Incorporated or Qualified	3a. Date of Last	Report	
					03/04/1991	04/30/1996	. iopoit	
2. Principal Pl	lace of Business 32G.A	2a. Mailing Address	3390	γ+	4. FEI Number		pplied For	
` `	lace of Business Abatato Ruffmus FL	26 P.O. BOX 6	17373	is n	65-0244844		lot Applicable	
Suite, Apt.		Suite, Apt. #, etc.	1 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0.5		- ¢0.75	Additional	
22	•	27	_		5. Certificate of Status Desired	1 1 7	beriupef	
City & State		City & State			6. Election Campaign Financing	\$5.00	May Be	
23		28			Trust Fund Contribution		to Fees	
Zip	Country	Zip	Country		8. This corporation owes or has pa	id the current year Ir	ntangible	
24	25	29	30		Personal Property Tax due June		□No	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Re	gistered Agent		
CUR	ILER, JOSEPH H.		81 Name	0	Les Torack H			
6380	82 Stree	L Addross	(P.O. Box Number is Not Acceptate	<u>*</u>				
FOR		Duni	anch on Ry					
			83	·		-		
			_ _					
			84 City	FLI	Marcs	FL 85 경영	Code	
11. Pursuant	to the provisions of Sections 607.0502	and 607,1508. Florida Statute	es, the above-name	d corpora			its registered	
office or r	egistered agent, or both, in the State im familiar with, and accord the obligat	Tiorida. Such change was a	uthorized by the co	rporation	's board of directors. I hereby accer	ot the appointment a	s registered	
	in labiliar with, and accept the obligat	ights of, Section 607.0505, Fig	T /		1. 0.1	l ala	1/25	
SIGNATURE	Signature, typed or professionarie of registered agent	and life if applicable (NOTE	Registered Gent signatu	te required y	when reinstating)	DATE DIAL	2/4/	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC		RS IN 12	
TALE	D	DELETE	1.1 TITLE	Pres	C. A. L.	Change	Addition	
NAME	CURLER, JOSEPH H.		1,2 NAME	<i></i>	Box Godos H.		:	
STREET ADDRESS	939 S YACHTSMAN DR		1.3 STREET ADDRESS	00	Bax 60003)	
CITY-ST-ZIP	SANIBEL FL		1,4 CITY-ST-ZIP	EJ	Myers, FL	33906		
TITLE		DELETE	2.1 TITLE	-	111941	Change	Addition	
NAME			2.2 NAME	1				
STREET ADDRESS			2.3 STREET ADDRESS		# ·			
CITY-ST-ZIP			2 4 CITY-ST-ZIP	1				
TITLE		DELETE	31 1IJLE	 		Change	☐ Addition	
NAME		_	3.2 NAME					
STREET ADDRESS			3.3 STREET ADDRESS					
CITY-ST-ZIP			3.4. CITY-ST-ZIP					
TITLE		DELETE	4.1 TiTLE	 		Change	Addition	
NAME		F-0	4. 2 NAME			- ononge		
STREET ADDRESS			4.3 STREET ADDRESS	1				
				'				
CITY-ST-ZIP TITLE		DELETE	4.4 CHY-ST-ZIP 5.1 TITLE	 -		Change	Addition	
		La berrie	5.2 NAME	1		C Charge		
NAME STREET ADDRESS								
STREET ADDRESS			5.3 STREET ADDRESS	1				
CITY-ST-ZIP		DELETE	5.4 CHY-ST-ZIP			Change	Addition	
TITLE		☐ bereie	6.1 THLE			Challge	L. Addition	
NAME .			6.2 NAME					
STREET ADDRESS	*		6.3 STREET ADDRESS				ľ	
CITY-ST-ZIP	no contifue the at the information of the	safety et de different de la lace de la lace	6.4 CITY-ST-ZIP	1	Pagilon 410 07/0/// Flacial Co.	a f distribute a military -	1 th a	
14. I do heret	by certify that the information supplied	with this tiling does not qualify	y for the exemption	stated in	Section 119.07(3)(i), Florida Statute	s. I further certify the	it ine	

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 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 attachment with agraddress.