## 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 706886** 

Entity Name: HUDSON WATER WORKS, INC.

**Current Principal Place of Business:** 

8724 NEW YORK AVE HUDSON, FL 34667

**Current Mailing Address:** 

8724 NEW YORK AVE HUDSON, FL 34667

FEI Number: 59-1382465 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FLICK, MARIE A 13829 COX AVE HUDSON, FL 34667 US

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

FILED Jan 18, 2016

**Secretary of State** 

CC1972372230

## Officer/Director Detail:

Title S Title \

NameRUFFER, NANCYNameKRAMER, WILLIAMAddress7109 MCCRAY DRAddress5929 BEVERLY DR.City-State-Zip:HUDSON FL 34667City-State-Zip:HUDSON FL 34667

Title D Title T

 Name
 MATTIX, MITCHELL
 Name
 HOLODAY, MICKEY

 Address
 14125 PLUM LN
 Address
 13620 MARIA DR

 City-State-Zip:
 HUDSON FL 34667
 City-State-Zip: HUDSON FL 34667

Title D Title P

NameSIBLEY, ROYNameFLICK, MARIE AAddress13931 MARGO AVENUEAddress13829 COX AVECity-State-Zip:HUDSON FL 34667City-State-Zip: HUDSON FL 34667

Title D Title D

NameMATTIX, MELVINNameHORAK, DURWOODAddress7828 AKRON AVEAddress26208 PINE HILL DRCity-State-Zip:HUDSON FL 34667City-State-Zip:BROOKSVILLE FL 34601

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DURWOOD HORAK UTILITIES DIRECTOR 01/18/2016

Electronic Signature of Signing Officer/Director Detail

Date