

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 709581

**Entity Name:** BRATT-DAVISVILLE WATER SYSTEM, INC.

**Current Principal Place of Business:**

4950 HWY 99A  
WALNUT HILL, FL 32568

**Current Mailing Address:**

P O BOX 428  
JAY , FL 32565 US

**FEI Number: 63-0596247**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

POWELL, J D  
6750 NOKOMIS RD  
WALNUT HILL, FL 32568 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

**Officer/Director Detail :**

Title P  
Name POWELL, J D  
Address 6750 NOKOMIS ROAD  
City-State-Zip: WALNUT HILL FL 32568

Title VP  
Name FAIRCLOTH, GLENN  
Address 5190 HIGHWAY 99  
City-State-Zip: CENTURY FL 32535

Title ST  
Name BECK, SUE  
Address 6441 W HWY 4  
P O BOX 622 ATMORE, AL36504  
City-State-Zip: CENTURY FL 32535

Title BOD  
Name BYRD, THOMAS  
Address 7441 ROCKAWAY CREEK RD  
City-State-Zip: WALNUT HILL FL 32568

Title BOD  
Name STABLER, JUDSON  
Address 5331 STILL RD  
City-State-Zip: CENTURY FL 32535

Title BOD  
Name DAVIS, JEAN  
Address 9871 HIGHWAY 97  
City-State-Zip: CENTURY FL 32535

Title BOD  
Name RYALS, JACK  
Address 3121 N HWY 99  
City-State-Zip: CENTURY FL 32535

*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: JD POWELL**

**PRESIDENT**

**02/25/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date