

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K35971

Entity Name: DRINKWATER & DRINKWATER, INC.**Current Principal Place of Business:**16578 OLD CHENEY HIGHWAY
ORLANDO, FL 32833**Current Mailing Address:**16578 OLD CHENEY HIGHWAY
ORLANDO, FL 32833**FEI Number:** 59-2915932**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DRINKWATER, MARGARET P.
16578 OLD CHENEY HIWAY
ORLANDO, FL 32833 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 | PD |
| Name | DRINKWATER, NORMAN W. |
| Address | 16578 OLD CHENEY HIGHWAY |
| City-State-Zip: | ORLANDO FL 32833 |

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|-----------------|--------------------------|
| Title | STD |
| Name | DRINKWATER, MARSHALL C. |
| Address | 16402 OLD CHENEY HIGHWAY |
| City-State-Zip: | ORLANDO FL 32833 |

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|-----------------|--------------------------|
| Title | CORRESPONDING SECRETARY |
| Name | DRINKWATER, RITA H |
| Address | 16578 OLD CHENEY HIGHWAY |
| City-State-Zip: | ORLANDO FL 32833 |

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|-----------------|--------------------------|
| Title | AUTHORIZED AGENT |
| Name | DRINKWATER, MARGARET P |
| Address | 16578 OLD CHENEY HIGHWAY |
| City-State-Zip: | ORLANDO FL 32833 |

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|-----------------|--------------------------|
| Title | PROJECT MANAGER |
| Name | DRINKWATER, PRESTON W |
| Address | 16578 OLD CHENEY HIGHWAY |
| City-State-Zip: | ORLANDO FL 32833 |

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|-----------------|--------------------------|
| Title | PROJECT MANAGER |
| Name | DRINKWATER, ALAN C |
| Address | 16578 OLD CHENEY HIGHWAY |
| City-State-Zip: | ORLANDO FL 32833 |

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARGARET P DRINKWATER**AUTHORIZED AGENT****03/02/2020**

Electronic Signature of Signing Officer/Director Detail

Date