

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# K52037

**Entity Name:** XERISCAPE WATER SYSTEMS, INC.

**Current Principal Place of Business:**

15111 S. MALLARD LN  
FORT MYERS, FL 33913

**Current Mailing Address:**

PO BOX 347  
ESTERO, FL 33929

**FEI Number:** 65-0088760

**Certificate of Status Desired:** No

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

WILLIAMSON, MARK  
7256 SWAN LAKE DRIVE  
FORT MYERS, FL 33919 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 WILLIAMSON, MARK  
Address 7256 SWAN LAKE DRIVE  
City-State-Zip: FT MYERS FL 33919

*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:** MARY ANN BOHN

**OFFICE MANAGER**

**01/09/2014**

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

\_\_\_\_\_  
Date