

**2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P22000018617

**Entity Name:** ARTISAN WATER CORP.

**Current Principal Place of Business:**

9526 ARGYLE FOREST BLVD  
ST 2B 318  
JACKSONVILLE, FL 32222

**Current Mailing Address:**

9526 ARGYLE FOREST BLVD., SUITE B2 #318  
JACKSONVILLE, FL 32222 US

**FEI Number:** 88-1213579

**Certificate of Status Desired:** No

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

DEGROOT, DAVID W  
9526 ARGYLE FOREST BLVD., SUITE B2 #318  
JACKSONVILLE, FL 32222 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            PRESIDENT  
Name            DEGROOT, DAVID  
Address        9526 ARGYLE FOREST BLVD., SUITE  
                  B2 #318  
City-State-Zip: JACKSONVILLE AL 32222

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:** DAVID DEGROOT

**MANAGER**

**02/06/2025**

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

\_\_\_\_\_  
Date