

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 24, 2004 8:00 am
Secretary of State

02-24-2004 90012 050 ****61.25

DOCUMENT # 709581

1. Entity Name

BRATT-DAVISVILLE WATER SYSTEM, INC.



Principal Place of Business

**11100 HWY 97
MC DAVID FL 32568
US**

Mailing Address

**P.O. DRAWER 770
ATMORE AL 36504
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

63-0596247

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**RYLAND, BEVERLY
5650 PINE FOREST RD
WALNUT HILL FL 32568**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
PELT, JAMES D
9410 HWY 47
CENTURY FL 32535** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
JOHNSON, JOHNNIE
2950 PURDUE RD
MC DAVID FL 32568** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**ST
RYLAND, BEVERLY
5650 PINE FOREST RD
WALNUT HILL FL 32568** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
WHEELER, BECKY
4421 N HWY 98
MC DAVID FL 32568** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
DORTCH, TIM
7801 JONES RD
MC DAVID FL 32568** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**BOD
KIMMONS, RAMOND
5631 PINE FOREST RD.
WALNUT HILL FL 32568** ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition
**BOARD OF DIRECTOR
DARIN PEEBLES
7036 MCCLHANEY RD
CENTURY FL 32535**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Beverly Ryland* **BEVERLY RYLAND** *2/2/04* **850-327-6778**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #