

2001 UNIFORM BUSINESS REPORT (UBR)

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

6. Name and Address of Current Registered Agent

JOHNSON, HERMAN
2950 PURDUE RD
MC DAVID FL 32568

7. Name and Address of New Registered Agent

Name

BEVERLY RYLAND

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

5650 PINE FOREST RD

City

WALNUT HILL

FL

Zip Code

32568

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

1/8/01

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE P
NAME JOHNSON, HERMAN ☒ Delete
STREET ADDRESS 2950 PURDUE RD
CITY-ST-ZIP MCDAVID FL

TITLE V
NAME VANPELT, JAMES ☒ Delete
STREET ADDRESS 9410 HWY 97
CITY-ST-ZIP CENTURY FL

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

TITLE D
NAME ROLEY, JIMMY ☐ Delete
STREET ADDRESS 5810 N. HWY 99
CITY-ST-ZIP CENTURY FL

TITLE D
NAME AMERSON, LINDA ☒ Delete
STREET ADDRESS 3250 W. HWY 4
CITY-ST-ZIP CENTURY FL 32535

TITLE D
NAME HESTER, JEFFREY ☐ Delete
STREET ADDRESS 4301 HWY 99
CITY-ST-ZIP CENTURY FL

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PRESIDENT ☒ Change ☐ Addition
NAME JAMES DAN PELT
STREET ADDRESS 9410 HWY 97
CITY-ST-ZIP CENTURY FL 32535

TITLE U. PRES. ☒ Change ☐ Addition
NAME LINDA AMERSON
STREET ADDRESS 3250 W. HWY 4
CITY-ST-ZIP CENTURY FL 32535

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

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

TITLE D ☒ Change ☐ Addition
NAME JOHNNIE JOHNSON
STREET ADDRESS 2950 PURDUE RD
CITY-ST-ZIP MCDAVID FL 32568

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

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

1/8/01

850-327-6778

FILED
Jan 16, 2001 8:00 am
Secretary of State

01-16-2001 90062 012 ****61.25

602289



DO NOT WRITE IN THIS SPACE

4. FEI Number 63-0596247

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

CRZE037 (10/00)

0088384