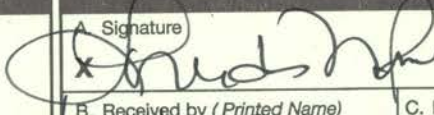



RECEIVED-FPSC

15 JAN 21 AM 9:07

COMMISSION
CLERK

| SENDER: COMPLETE THIS SECTION | COMPLETE THIS SECTION ON DELIVERY | |
|--|---|--|
| <ul style="list-style-type: none">■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.■ Print your name and address on the reverse so that we can return the card to you.■ Attach this card to the back of the mailpiece, or on the front if space permits. | A. Signature  | <input type="checkbox"/> Agent <input type="checkbox"/> Addressee |
| 1. Article Addressed to: 140120-WU (05739-14; 06154-14) 140121-WU (05741-14; 06152-14) | B. Received by (Printed Name) W. J. Smith | C. Date of Delivery |
| TROY RENDELL MNGR REG UTILITIES RAINTREE WATERWORKS INC BRENDENWOOD WATERWORKS INC C/O 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652 | D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No | |
| 2. Article Number (Transfer from service label) |  | |
| | 3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. | 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes |
| PS Form 3811, February 2004 | 7011 3500 0001 5977 6918 | Domestic Return Receipt 102595-02-M-1540 |