FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Feb 28, 2002 8:00 am 508007 DOCUMENT # **Secretary of State** 1. Entity Name PIPELINE UTILITIES INCORPORATED 02-28-2002 90055 045 ***150 00 Principal Place of Business Mailing Address GARDEN INDUSTRIAL PARK GARDEN INDUSTRIAL PARK 3610 FISCAL CT 3610 FISCAL CT RIVIERA BCH. FL 33404-1754 RIVIERA BCH. FL 33404-1754 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1684417 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CRADDOCK, J. DAVID Street Address (P.O. Box Number is Not Acceptable) 6914 141ST LANE PALM BCH GDNS FL 33418 City Zip Code FL 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** Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE TITLE Change ☐ Addition CRADDOCK, RUTH ANN NAME NAME 6820 140TH LANE STREET ADDRESS STREET ADDRESS PALM BCH GDNS FL 33418-7245 CITY-ST-ZIP CITY-ST-ZIP COBD TITLE TITLE Change ☐ Addition CRADDOCK, JIM K. NAME NAME 6820 140TH AVE STREET ADDRESS STREET ADDRESS **PALM BCH GDNS FL 33418-7245** CITY-ST-7IP CITY-ST-ZIP **PDSG** TITLE ☐ Delete TITLE ☐ Addition Change CRADDOCK, JAMES DAVID NAME NAME 6914 141ST LANE STREET ADDRESS STREET ADDRESS PALM BEACH GARDENS FL 33418-7245 CITY-ST-ZIP CITY-ST-ZIP VD TITLE ☐ Delete TITLE ☐ Change ☐ Addition TYO, RANDY S NAME NAME 1073 SPRUCE RIDGE DRIVE STREET ADDRESS STREET ADDRESS STUART FL 34994 CITY-ST-ZIP CITY-ST-7(P TITLE ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITI F Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP 13. 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 suppliemental 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 of the state empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

REQUIRAND Tyo, Vice President

POPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

SIGNATURE