

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 615457

FILED
Apr 20, 2005
Secretary of State

Entity Name: FLORIDA METER SERVICE COMPANY

Current Principal Place of Business:

1939 CONNERS CHURCH ROAD
COBBTOWN, GA 30420

New Principal Place of Business:

Current Mailing Address:

PO BOX 216
COBBTOWN, GA 30420 US

New Mailing Address:

FEI Number: 59-1991412 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VANCE, L. ALEXANDER
VANCE AND LOFANE, P.A.
200 BREVARD AVE
COCOA, FL 32922 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: EDGAR, TIMOTHY LOUIS
Address: 1939 CONNERS CHURCH RD
City-St-Zip: COBBTOWN, GA 30420

Title: T () Delete
Name: EDGAR, AMELIA G.
Address: 130 MILES RD
City-St-Zip: METTER, GA 30439

Title: SEC () Delete
Name: EDGAR, JOHN TIMOTHY
Address: 130 MILES ROAD
City-St-Zip: METTER, GA 30439

Title: V () Delete
Name: EDGAR, HOLLY P
Address: 1939 CONNERS CHURCH RD
City-St-Zip: COBBTOWN, GA 30420

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: HOLLY P. EDGAR

V

04/20/2005

Electronic Signature of Signing Officer or Director

_____ Date