2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 717841

Entity Name: BONITA SPRINGS UTILITIES, INC.

Current Principal Place of Business:

11900 EAST TERRY STREET BONITA SPRINGS. FL 34135

Current Mailing Address:

11900 EAST TERRY STREET BONITA SPRINGS, FL 34135 US

FEI Number: 59-1350003 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

PARTIN, FRED 11860 E. TERRY STREET BONITA SPRINGS, FL 34135 US

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

FILED Apr 10, 2015

Secretary of State

CC2499209622

Officer/Director Detail:

 Title
 TREASURER
 Title
 PRESIDENT

 Name
 MCKEE, DAVID
 Name
 STRECANSKY, JIM

Address 22210 FAIRMONT CT Address 9106 WILLOW WALK

City-State-Zip: ESTERO FL 33928 City-State-Zip: BONITA SPRINGS FL 34135

TitleVPTitleDIRECTORNameBACHMAN, ROBERTNameMATHES, JOHN

Address 24961 WINDWARD BLVD Address 27601 PIERCE AVE

City-State-Zip: BONITA SPRINGS FL 34134 City-State-Zip: BONITA SPRINGS FL 34135

Title SECRETARY Title DIRECTOR

Name HOCHSTETLER, HENRY Name LILES JR, FRANK
Address 10591 LANDAU LANE Address 27233 JC LANE

City-State-Zip: BONITA SPRINGS FL 34135 City-State-Zip: BONITA SPRINGS FL 34135

Title DIRECTOR Title DIRECTOR

NameMALLOY, MICHAELNameATTWOOD, PAULAddress28585 CLINTON LANEAddress3890 RIVIERA CIRCLE

City-State-Zip: BONITA SPRINGS FL 34134 City-State-Zip: BONITA SPRINGS FL 34134

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I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: FRANK LILES JR DIRECTOR 04/10/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name SHARKEY, ROBERT
Address 26625 HICKORY BLVD

City-State-Zip: BONITA SPRINGS FL 34134