

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 717841

Entity Name: BONITA SPRINGS UTILITIES, INC.**Current Principal Place of Business:**11860 EAST TERRY STEET
BONITA SPRINGS, FL 34135**Current Mailing Address:**11860 EAST TERRY STEET
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**Officer/Director Detail :**Title D
Name MCKEE, DAVID
Address 22210 FAIRMONT CT
City-State-Zip: ESTERO FL 33928Title PD
Name BACHMAN, ROBERT
Address 24961 WINDWARD BLVD
City-State-Zip: BONITA SPRINGS FL 34134Title D
Name HOCHSTETLER, HANK
Address 10591 LANDAU LANE
City-State-Zip: BONITA SPRINGS FL 34135Title VPD
Name STRECKANSKY, JIM
Address 9106 WILLOW WALK
City-State-Zip: BONITA SPRINGS FL 34135Title SD
Name MATHES, JOHN
Address 27601 PIERCE AVE
City-State-Zip: BONITA SPRINGS FL 34135Title TD
Name LILES JR, FRANK
Address 27233 JC LANE
City-State-Zip: BONITA SPRINGS FL 34135

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**TREASURER****04/12/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date