

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 665329

Entity Name: W.B.B. UTILITIES, INC.

Current Principal Place of Business:

04223 BAIR AVENUE
FRUITLAND PARK, FL 34731

Current Mailing Address:

04223 BAIR AVENUE
FRUITLAND PARK, FL 34731 US

FEI Number: 59-1992465

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BAIR, VICKI S
04223 BAIR AVE.
FRUITLAND PARK, FL 34731 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 PD
Name BAIR, RICHARD S
Address 04223 BAIR AVE.
City-State-Zip: FRUITLAND PARK FL 34731

Title STD
Name BAIR, VICKI S
Address 04223 BAIR AVE.
City-State-Zip: FRUITLAND PARK FL 34731

Title VPD
Name MARSHALL, DAVID
Address 05634 E HARBOR DRIVE
City-State-Zip: FRUITLAND PARK FL 34731

Title D
Name BAIR, CRAIG A
Address 143 CRESCENT BOULEVARD
City-State-Zip: SANFORD FL 32771

Title D
Name MARSHALL, NANCY W
Address 04128 BAIR AVE
City-State-Zip: FRUITLAND PARK FL 34731

Title D
Name HALL, BEVERLY DIANE
Address 3616 CHELSEA STREET
City-State-Zip: ORLANDO FL 32803

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

SIGNATURE: VICKI S BAIR

SECRETARY/TREASURER 02/15/2013

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date