

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000095907

**Entity Name:** SHADOW METERING INC.

**Current Principal Place of Business:**

1800 OLD MOODY BLVD., STE 1  
BUNNELL, FL 32110

**Current Mailing Address:**

12 FAYETTE LN.  
PALM COAST, FL 32137

**FEI Number:** 20-1266753

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

WILLIAMS, DAVID A  
12 FAYETTE LN  
PALM COAST, FL 32137 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 P  
Name WILLIAMS, NANCY J  
Address 12 FAYETTE LN  
City-State-Zip: PALM COAST FL 32137

Title V  
Name WILLIAMS, DAVID A  
Address 12 FAYETTE LN  
City-State-Zip: PALM COAST FL 32137

*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:** DAVID WILLIAMS

VP

01/27/2013

Electronic Signature of Signing Officer/Director Detail

Date