

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 270909

1. Entity Name

SOUTHSIDE UTILITIES, INC.

FILED
Mar 15, 2000 8:00 am
Secretary of State

03-15-2000 90024 024 ***150.00

Principal Place of Business

9540 STATE RD 13
JACKSONVILLE FL 32257-5432

Mailing Address

P.O. BOX 23627
JACKSONVILLE FL 32241-3627
US

822227



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-1060485

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FOSTER, DAVID M.
1300 RIVERPLACE BLVD
JACKSONVILLE FL 32207

7. Name and Address of New Registered Agent

Name

FOSTER DAVID M

Street Address (P.O. Box Number is Not Acceptable)

9540 SAN JOSE BLVD

City

JACKSONVILLE

FL

Zip Code
32257

8. 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 DAVID M FOSTER

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

03/08/2000

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back). ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME FOSTER, DAVID M.
STREET ADDRESS 1300 RIVERPLACE BLVD
CITY-ST-ZIP JACKSONVILLE FL

TITLE D ☐ Delete
NAME SMITH, P. JEREMY
STREET ADDRESS 9540 SAN JOSE BLVD
CITY-ST-ZIP JAX, FL 00000

TITLE PD ☐ Delete
NAME LUKE, JOSEPH C
STREET ADDRESS 9540 SNA JOSE BLVD
CITY-ST-ZIP JAX, FL 00000

TITLE TAS ☐ Delete
NAME GLAVIN, THOMAS M.
STREET ADDRESS 9540 SAN JOSE BLVD.
CITY-ST-ZIP JACKSONVILLE FL

TITLE VS ☐ Delete
NAME LUEDERS, JACK C. J
STREET ADDRESS 9540 SAN JOSE BLVD
CITY-ST-ZIP JACKSONVILLE FL

TITLE AS ☐ Delete
NAME ANDERSON, ANTHONY
STREET ADDRESS 1301 GULF LIFE DR.
CITY-ST-ZIP JACKSONVILLE DL

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE VP ☐ Change ☒ Addition
NAME KEN WILSON
STREET ADDRESS 9540 SAN JOSE BLVD
CITY-ST-ZIP JACKSONVILLE FL 32257

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Jack C Lueders Jr
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JACK C LUEDERS JR

03/08/2000

Date

Daytime Phone #

CR2F034 (9/99)