

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 270909

1. Entity Name
SOUTHSIDE UTILITIES, INC.

FILED
Apr 24, 2001 8:00 am
Secretary of State

04-24-2001 90299 048 ***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

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-1060485

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FOSTER, DAVID M.
9540 SAN JOSE BLVD
JACKSONVILLE FL 32257

Name
MCCORMACK, JAMES E
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 *J.E. McCormack*
Signature, typed or printed name of registered agent and title if applicable.

J.E. MCCORMACK, SECRETARY

4-16-01

(NOTE: Registered Agent signature required when reinstating)

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, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FOSTER, DAVID M. 1300 RIVERPLACE BLVD JACKSONVILLE FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SMITH, P. JEREMY 9540 SAN JOSE BLVD JAX, FL 00000	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LUKE, JOSEPH C 9540 SNA JOSE BLVD JAX, FL 00000	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TAS GLAVIN, THOMAS M. 9540 SAN JOSE BLVD. JACKSONVILLE FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS LUEDERS, JACK C. J 9540 SAN JOSE BLVD JACKSONVILLE FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS ANDERSON, ANTHONY 1301 GULF LIFE DR. JACKSONVILLE DL	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT/AS GLAVIN, THOMAS M. 9540 SAN JOSE BLVD JACKSONVILLE, FL 32257	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/T/AS LUEDERS, JACK C JR 9540 SAN JOSE BLVD JACKSONVILLE, FL 32257	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *J.E. McCormack* J.E. MCCORMACK, SECRETARY

4-16-01

904 448 2910

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)

Attachment Doc # 270909
747603

Southside Utilities Inc.
PO BOX 23627
Jacksonville, FL 32241

April 16, 2001

Attachment for Document #270909
Addition:

<u>Name</u>	<u>TITLE</u>
McCormack, James E.	S
Wilson, Ken	V