

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 360681

Entity Name: ALOHA UTILITIES INC

FILED
Apr 28, 2009
Secretary of State

Current Principal Place of Business:

6915 PERRINE RANCH ROAD
NEW PORT RICHEY, FL 346553904 US

New Principal Place of Business:

27251 STATE ROAD 54
SUITE B14-515
WESLEY CHAPEL, FL 33544 US

Current Mailing Address:

6915 PERRINE RANCH ROAD
NEW PORT RICHEY, FL 346553904 US

New Mailing Address:

PO BOX 3557
HOLIDAY, FL 34692 US

FEI Number: 59-1299038

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WATFORD, STEPHEN
6915 PERRINE RANCH ROAD
NEW PORT RICHEY, FL 34655 US

Name and Address of New Registered Agent:

WATFORD, STEPHEN
27251 STATE ROAD 54
SUITE B14-515
WESLEY CHAPEL, FL 33544 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: STEPHEN WATFORD

04/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: SPEER, LYNNDAL
Address: 6915 PERRINE RANCH ROAD
City-St-Zip: NEW PORT RICHEY, FL 346553904

Title: PD () Delete
Name: WATFORD, STEPHEN
Address: 6915 PERRINE RANCH ROAD
City-St-Zip: NEW PORT RICHEY, FL 346553904

Title: TS (X) Delete
Name: YACOBELLI, PAMELA
Address: 6915 PERRINE RANCH ROAD
City-St-Zip: NEW PORT RICHEY, FL 346553904

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: SPEER, LYNNDAL
Address: PO BOX 3557
City-St-Zip: HOLIDAY, FL 34692

Title: PDTS (X) Change () Addition
Name: WATFORD, STEPHEN
Address: PO BOX 3557
City-St-Zip: HOLIDAY, FL 34692

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: STEPHEN WATFORD

PRES

04/28/2009

Electronic Signature of Signing Officer or Director

Date