

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 443893

FILED  
Jan 04, 2007  
Secretary of State

Entity Name: UTILITY SERVICE OF GAINESVILLE, INC.

## Current Principal Place of Business:

1360 NW 53RD AVENUE  
GAINESVILLE, FL 32653 US

## New Principal Place of Business:

## Current Mailing Address:

1360 NW 53RD AVENUE  
GAINESVILLE, FL 32653 US

## New Mailing Address:

FEI Number: 59-1499920      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

EBLING, HAROLD O  
22011 NW 75TH AVE RD  
PO BOX 125  
MICANOPY, FL 32667 US

## Name and Address of New Registered Agent:

EBLING, HAROLD O  
22011 NW 75TH AVE RD  
MICANOPY, FL 32667 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: HAROLD O. EBLING

01/04/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: EBLING, HAROLD O PRESIDE  
Address: 22011 NW 75 AVE RD  
City-St-Zip: MICANOPY, FL

Title: VDS ( ) Delete  
Name: NANCARROW, JUANITA G  
Address: P.O. BOX 61  
City-St-Zip: MICANOPY, FL 32667

Title: T ( ) Delete  
Name: EBLING, MARTHA  
Address: 3002 AVE G NW  
City-St-Zip: WINTER HAVEN, FL 33880

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: JUANITA G. NANCARROW

VDS

01/04/2007

Electronic Signature of Signing Officer or Director

Date