## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** FLORIDA DEPARTMENT OF STATE FILED CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 98 JAN 18 PM 3: 46 1998 DOCUMENT # (8) 451220 SECRETARY OF STATE TALLAHASSEE, FLORIDA LONGWOOD UTILITIES, INC. Principal Place of Business Mailing Address LEGAL DEPT 9TH FLOOR LEGAL DEPT 9TH FLOOR 2601 S BAYSHORE DR 2601 S BAYSHORE DR DO NOT WRITE IN THIS SPACE MIAMI FL 33133-2461 MIAMI FL 33133-2461 3. Date Incorporated or Qualified 04/30/1974 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-1576656 Not Applicable 26 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. Z 5. Certificate of Status Desired Fee Required 22 27 City & State City & State Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Zip Country Zip This corporation owes or has paid the current year Intangible Yes ☐ No Personal Property Tax due June 30. 24 30 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name GOLDMAN, JOEL K LEGAL DEPT. 9TH FLOOR 82 Street Address (P.O. Box Number is Not Acceptable) 2601 S BAYSHORE DR 83 **MIAMI FL 33133** В4 Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or pented name of registered agent and late if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12. Change Addition DELETE 11 TITLE TITLE 800002439438-RUTHERFORD, LARRY J 1.2 NAME NAME -02/24/98--01066--006 2601 S BAYSHORE DR 1.3 STREET ADDRESS STREET ADDRESS \*\*\*\*158.75 \*\*\*\*158.75 MIAMI FL 1.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE TITLE VAS 21 TITLE NAME LANGLEY, MARCIA H. 2.2 NAME 2601 S. BAYSHORE DRIVE STREET ADDRESS 2 3 STREET ADDRESS MIAMI FL 2.4 CITY-ST-ZIP CITY-ST-ZiP DELETE Change Addition 3.1 TITLE TITLE FISCHER, JOHN H. 3.2 NAME NAME 2601 S. BAYSHORE DRIVE STREET ADDRESS 3.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 3.4. CITY - ST - ZIP VDCAS X Addition DELETE **VDCS** 4.1 TITLE TITLE Cook, Paula CARLETON, CALLIS N. MAME 4. 2 NAME 2601 S. Bayshore Drive 2601 S. BAYSHORE DRIVE 4.3 STREET ADDRESS STREET ADDRESS Miami, Florida 33133 MIAMI FL CITY-ST-ZIP 4.4 CITY - ST - ZIP Change Addition DELETE D٧ 5.1 TITLE TITLE JEFFREY, THOMAS W. 5.2 NAME Laguardia, John NAME 2601 S. BAYSHORE DRIVE 5.3 STREET ADDRESS 2601 S.Bayshore Drive STREET ADDRESS MIAMI FL 5.4 CITY - ST - ZIP Miami, Florida 33133 CITY-ST-ZIP Change Addition DELETE 6.1 TITLE TATLE VSD GOLDMAN, JOEL K. 6.2 NAME NAME 2601 S BAYSHORE DR STREET ADDRESS **6.3 STREET ADDRESS** MIAMI FL CITY-ST-ZIP 6.4 CITY - ST-ZIP 14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

7.5.050 1AM

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