

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Division of Corporations
Tallahassee, Florida
32399-0001

APPROVED
AND
FILED

DOCUMENT # 516728

(3)

95 MAY -1 PM 12:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RAMPART UTILITIES, INC.

426 N.E. 5TH ST
HALLANDALE FL 33009

5550 26TH ST W
#6
BRADENTON FL 34207
US

DO NOT WRITE IN THIS SPACE

2. Filing Date: 10/19/1976	2a. Filing Agent: 59-1868215	3a. Date of Last Report: 01/28/1994
21. 5550 26TH ST W	26. 59-1868215	3b. Filing Agent: 59-1868215
22. L	27. 59-1868215	5. Certificate of Status Desired: ☐ \$8.75 Additional Fee Required
23. BRADENTON FL	28. 59-1868215	6. Election Campaign Financing: ☐ \$5.00 May Be Added to Fees
24. 34207	29. 59-1868215	8. This corporation has liability for intangible tax under S. 199.037 Florida Statutes: ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KEITH, HUGH
426 N.E. 5TH ST.
HALLANDALE FL 33009

81. Name:	85. Zip Code:
82. Street Address (P.O. Box Number is Not Acceptable):	FL
83. City:	
84. State:	

11. Pursuant to the provisions of Sections 607.01(2) and 607.01(3), 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 Sections 607.01(2), Florida Statutes.

SIGNATURE

Signature of Registered Agent

Signature of Registered Agent

Signature

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
NAME	P KEITH, HUGH 2100 KINGS HIGHWAY PORT CHARLOTTE FL	1. NAME	☐ Change ☐ Addition
STREET ADDRESS	R STEFFENS, THEODORE C. 5350 26TH ST. W. #6 BRADENTON FL	2. NAME	☐ Change ☐ Addition
CITY	D CAIN, LINDY D. 5550 26TH ST. W. #6 BRADENTON FL	3. NAME	☐ Change ☐ Addition
STATE		4. NAME	☐ Change ☐ Addition
ZIP CODE		5. NAME	☐ Change ☐ Addition
		6. NAME	☐ Change ☐ Addition
		7. NAME	☐ Change ☐ Addition
		8. NAME	☐ Change ☐ Addition
		9. NAME	☐ Change ☐ Addition
		10. NAME	☐ Change ☐ Addition
		11. NAME	☐ Change ☐ Addition
		12. NAME	☐ Change ☐ Addition
		13. NAME	☐ Change ☐ Addition
		14. NAME	☐ Change ☐ Addition
		15. NAME	☐ Change ☐ Addition
		16. NAME	☐ Change ☐ Addition
		17. NAME	☐ Change ☐ Addition
		18. NAME	☐ Change ☐ Addition
		19. NAME	☐ Change ☐ Addition
		20. NAME	☐ Change ☐ Addition

14. I, the undersigned, certify that the information appearing on this filing is substantially true and correct, and that I am a resident of the State of Florida. I further certify that the information appearing on this filing is not false or misleading, and that my signature shall have the same legal effect as if made under oath. I am familiar with and accept the obligations of Sections 607.01(2), Florida Statutes. This report is prepared by: ☐ Agent for 1995 Florida Statutes and ☐ Agent for 1995 Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF FILING OFFICER OR DIRECTOR

Theodore C. Steffens, Treasurer

4/17/95 813 756-5541