

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 526747

Entity Name: LWV UTILITIES, INC.

**FILED**  
**Apr 19, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

7552 CONGRESS ST  
STE 4  
NEW PORT RICHEY, FL 346531106 US

**New Principal Place of Business:**

**Current Mailing Address:**

7552 CONGRESS ST  
STE 4  
NEW PORT RICHEY, FL 346531106 US

**New Mailing Address:**

FEI Number: 59-1725898

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WEEKS, JAMES C  
7552 CONGRESS ST  
STE 4  
NEW PORT RICHEY, FL 34653 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PT  
Name: WEEKS, JAMES C  
Address: 7552 CONGRESS ST, STE 4  
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: VS  
Name: MILLER, RICKY A  
Address: 4542 GARNET DR, #303  
City-St-Zip: NEW PORT RICHEY, FL 34652

I hereby 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 all other like empowered.

SIGNATURE: JAMES C WEEKS

MR.

04/19/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date