

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 01, 2008 8:00 am
Secretary of State

05-01-2008 90193 050 ***150.00

DOCUMENT # 568845

1. Entity Name
RICE CREEK UTILITY COMPANY



Principal Place of Business
**2536 COUNTRYSIDE BLVD
SUITE 250
CLEARWATER, FL 33763 US**

Mailing Address
**2536 COUNTRYSIDE BLVD
SUITE 250
CLEARWATER, FL 33763 US**

00000170



01032008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
37-0857520

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**WILDER, MAURICE F.
2536 COUNTRYSIDE BLVD
SUITE 250
CLEARWATER, FL 33763**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD WILDER, MAURICE F. 2536 COUNTRYSIDE BLVD SUITE 250 CLEARWATER, FL 33763
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD WILDER, COLBY M 2536 COUNTRYSIDE BLVD SUITE 250 CLEARWATER, FL 33763
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CARENTENUTO, MARY 2536 COUNTRYSIDE BLVD SUITE 250 CLEARWATER, FL 33763
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other persons empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____

Daytime Phone # _____