FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR -3 PM 4:46

DOCUMENT # **572185** (7)

1. Corporation Name
RAINBOW SPRINGS UTILITIES, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
C/O CHASE ENTERPRISES / JOSEPH KORZENIK ONE COMMERCIAL PLAZA HARTFORD CT 06103	C/O CHASE ENTERPRISES / JOSEPH KORZENIK ONE COMMERCIAL PLAZA HARTFORD CT 06103

3. Date Incorporated or Qualified: **05/17/1978** — 3a. Date of Last Report: **04/19/1994**

2. Principal Place of Business (21) — 2a. Mailing Address (26)

Suite, Apt. #, etc. (22) — Suite, Apt. #, etc. (27)

City & State (23) — City & State (28)

Zip (24) Country (25) — Zip (29) Country (30)

4. FEI Number: **59-2128052** ☐ Applied For ☐ Not Applicable

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

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

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

ST LOUIS, ROLAND R JR
FREEDMAN, RODRIGUEZ & FERRARO, P.A.
~~200 SOUTH BISCAYNE BLVD~~
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 201 S. Biscayne Blvd., 2300 Miami Center

84 City **FL** 85 Zip Code

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] Roland R. St. Louis, Jr. 3-29-95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	VSD	1.1 TITLE		☐ Change ☐ Addition
NAME	CHASE, ARNOLD L.	1.2 NAME		
STREET ADDRESS	ONE COMMERCIAL PLAZA	1.3 STREET ADDRESS		
CITY-ST-ZIP	HARTFORD CT	1.4 CITY-ST-ZIP		
TITLE	VTD	2.1 TITLE		☐ Change ☐ Addition
NAME	FREEDMAN, CHERYL CHASE	2.2 NAME		
STREET ADDRESS	ONE COMMERCIAL PLAZA	2.3 STREET ADDRESS		
CITY-ST-ZIP	HARTFORD CT	2.4 CITY-ST-ZIP		
TITLE	D	3.1 TITLE		☐ Change ☐ Addition
NAME	CHASE, DAVID T.	3.2 NAME		
STREET ADDRESS	ONE COMMERCIAL PLAZA	3.3 STREET ADDRESS		
CITY-ST-ZIP	HARTFORD CT	3.4 CITY-ST-ZIP		
TITLE	VAS	4.1 TITLE		☐ Change ☐ Addition
NAME	SMALLRIDGE, LOWELL P.	4.2 NAME		
STREET ADDRESS	19152 SW 81 PL RD	4.3 STREET ADDRESS		
CITY-ST-ZIP	DUNNELLON FL	4.4 CITY-ST-ZIP		
TITLE	P	5.1 TITLE		☐ Change ☐ Addition
NAME	COLLINS, JAMES T.	5.2 NAME		
STREET ADDRESS	19152 SW 81 PL RD	5.3 STREET ADDRESS		
CITY-ST-ZIP	DUNNELLON FL	5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: [signature] Cheryl Chase Freedman Exec. Vice President 3/27/95 (203) 549-1674
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Title — Date — Daytime Phone #

000000 CP