FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **572185** (7)

1. Corporation Name
RAINBOW SPRINGS UTILITIES, INC.

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

Mailing Address
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: 04/03/1995

2. Principal Place of Business
21
Suite Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite Apt. #, etc.
27
City & State
28
Zip 29 Country 30

4. FEI Number: 59-2129052 [ ] 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
FRIEDMAN, RODRIGUEZ & FERRARO, P.A.
201 S. BISCAYNE BLVD., 2300 MIAMI CENTER
MIAMI FL 33131

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Section 607.0505, 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 and in connection therewith does hereby certify that the corporation's Board of Directors has authorized the foregoing change(s) and that the registered agent has agreed to the change(s). I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	VSD	[ ] DELETE
NAME	CHASE, ARNOLD L.	
STREET ADDRESS	ONE COMMERCIAL PLAZA	
CITY-ST-ZIP	HARTFORD CT	
TITLE	VTD	[ ] DELETE
NAME	FREEDMAN, CHERYL CHASE	
STREET ADDRESS	ONE COMMERCIAL PLAZA	
CITY-ST-ZIP	HARTFORD CT	
TITLE	D	[ ] DELETE
NAME	CHASE, DAVID T.	
STREET ADDRESS	ONE COMMERCIAL PLAZA	
CITY-ST-ZIP	HARTFORD CT	
TITLE	VAS	[ ] DELETE
NAME	SMALLRIDGE, LOWELL P.	
STREET ADDRESS	19152 SW 81 PL RD	
CITY-ST-ZIP	DUNNELLON FL	
TITLE	P	[ ] DELETE
NAME	COLLINS, JAMES T.	
STREET ADDRESS	19152 SW 81 PL RD	
CITY-ST-ZIP	DUNNELLON FL	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	[ ] Change	[ ] Addition
12 NAME		
13 STREET ADDRESS		
14 CITY-ST-ZIP		
21 TITLE	[ ] Change	[ ] Addition
22 NAME		
23 STREET ADDRESS		
24 CITY-ST-ZIP		
31 TITLE	[ ] Change	[ ] Addition
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		
41 TITLE	[ ] Change	[ ] Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE	[ ] Change	[ ] Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE	[ ] Change	[ ] Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this report is accurate and that the filing fee is not due for the exemption stated in Section 607.0122(26), 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 or other court appointed fiduciary pursuant to Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 of this report or on any attachment with true titles.

SIGNATURE: Cheryl Chase Freedman
Exec. Vice President 3/20/96 (860) 549-1674
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)