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PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

FILED  
Feb 13 1997 8:00 am  
Secretary of State

DOCUMENT # 618348

(7)

1. Corporation Name

COMPUTER UTILITIES, INC.



Principal Place of Business

4350 W. CYPRESS ST #750  
750  
TAMPA FL 33607  
US

Mailing Address

4350 W. CYPRESS ST.  
750  
TAMPA FL 33607-4154  
US

3. Date Incorporated or Qualified

04/23/1979

3a. Date of Last Report

04/12/1996

2. Principal Place of Business

21 8141 AQUILA STREET

2a. Mailing Address

26 PO BOX 1074

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 #348

27

City & State

City & State

23 PORT RICHEY

28 PORT RICHEY

Zip

Country

Zip

Country

24 34668

25 PASCO

29 34673

30 PASCO

9. Name and Address of Current Registered Agent

WINGATE, GAYLORD V  
4350 W. CYPRESS ST.  
SUITE 750  
TAMPA FL 33607

10. Name and Address of New Registered Agent

81 Name

Gaylord V. Wingate Sr.

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

8141 AQUILA STREET

83

#348

84

PORT RICHEY

FL

85 Zip Code

34668

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 G. V. Wingate Sr. VP

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Jan 27 1997

12. OFFICERS AND DIRECTORS

TITLE DVP  
NAME WINGATE, GAYLORD V  
STREET ADDRESS 4350 W. CYPRESS ST SUITE 750  
CITY - ST - ZIP TAMPA FL

☐ DELETE

TITLE PD  
NAME GAYLORD, WINGATE V  
STREET ADDRESS 4350 CYPRESS ST. SUITE 750  
CITY - ST - ZIP TAMPA FL

☒ DELETE

TITLE STD  
NAME WINGATE, DELURY M.  
STREET ADDRESS 4350 W. CYPRESS ST. SUITE 750  
CITY - ST - ZIP TAMPA FL

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DVP  
1.2 NAME Wingate Sr, Gaylord V.  
1.3 STREET ADDRESS 8141 AQUILA ST. #348  
1.4 CITY - ST - ZIP Port Richey, FL. 34668

☒ Change ☐ Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY - ST - ZIP

☐ Change ☐ Addition

3.1 TITLE DVP  
3.2 NAME Wingate, Delury M.  
3.3 STREET ADDRESS 8141 AQUILA ST. #348  
3.4 CITY - ST - ZIP Port Richey, FL. 34668

☒ Change ☐ Addition

4.1 TITLE DVP  
4.2 NAME Wingate, Pamela  
4.3 STREET ADDRESS 27 W. Ridley Ave  
4.4 CITY - ST - ZIP Ridley Park, Pa 19078

☐ Change ☒ Addition

5.1 TITLE DVP  
5.2 NAME Wingate Gregory  
5.3 STREET ADDRESS 27 W. Ridley Ave  
5.4 CITY - ST - ZIP Ridley Park, Pa 19078

☐ Change ☒ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY - ST - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan 27 1997 813-847-0273

Date

Daytime Phone #

CR2E034 (9/96)