

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
 95 MAR 27 AM 10:23

DOCUMENT # 679054 (7)

1. Corporation Name
MYAKKA UTILITIES, INC.

DO NOT WRITE IN THIS SPACE.

Principal Place of Business 1225 S TAMiami TR P O BOX 2892 SARASOTA FL 34230	Mailing Address 1225 S TAMiami TR P O BOX 2892 SARASOTA FL 34230
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3. Date Incorporated or Qualified 07/18/1980	3a. Date of Last Report 03/24/1994
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2. Principal Place of Business 21	2a. Mailing Address 26
State, Apt. #, etc. 22	State, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25

4. FEI Number 35-1122519	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$0.75 Additional Fee Required
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6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
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8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No
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9. Name and Address of Current Registered Agent	
MESHAD, JOHN W 1900 RINGLING BLVD SARASOTA, FL 34236	

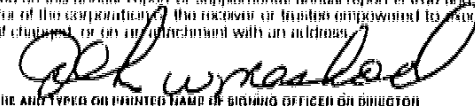
10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	
85 Zip Code	FL

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, typed or printed name of registered agent and title of corporation)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	STD	1.1 TITLE	☐ Change ☐ Addition
NAME	MESHAD, JOHN W	1.2 NAME	
STREET ADDRESS	1900 RINGLING BOULEVARD	1.3 STREET ADDRESS	
CITY, ST, ZIP	SARASOTA, FLORIDA 00000	1.4 CITY, ST, ZIP	
TITLE	PD	2.1 TITLE	☐ Change ☐ Addition
NAME	SYPRETT, JIM D	2.2 NAME	
STREET ADDRESS	1900 RINGLING BLVD	2.3 STREET ADDRESS	
CITY, ST, ZIP	SARASOTA FL	2.4 CITY, ST, ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY, ST, ZIP		3.4 CITY, ST, ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY, ST, ZIP		4.4 CITY, ST, ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY, ST, ZIP		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)(b), 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 of changes, or on an attachment with an address.

SIGNATURE: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
JOHN W. MESHAD

3/22/95
 Date

813-366-1047
 Telephone Number