2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000005682

GARBER, CHARLES N

BEDMINSTER, NJ 07921

550 ROUTE 202-206

Name:

Address:

City-St-Zip:

FILED Apr 19, 2004 Secretary of State

Entity Name: NUI SERVICE, INC **Current Principal Place of Business: New Principal Place of Business:** 550 ROUTE 202/206 BEDMINSTER, NJ 079210760 **Current Mailing Address: New Mailing Address:** P.O. BOX 760 ATTN: CAROL SLIKER BEDMINSTER, NJ 079210760 FEI Number: 22-3831010 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition KEAN, JOHN JR. MATTHEWS, CRAIG G Name: Name: 550 ROUTE 202/206 550 ROUTE 202/206 Address: Address: City-St-Zip: BEDMINSTER, NJ 079210760 City-St-Zip: BEDMINSTER, NJ 079210760 Title: VPS Title: **VPSD** () Delete (X) Change () Addition Name: VAN HORN, JAMES R Name: OVERLY, STEVEN D 550 ROUTE 202/206 550 ROUTE 202/206 Address: Address: BEDMINSTER, NJ 079210760 BEDMINSTER, NJ 079210760 City-St-Zip: City-St-Zip: VPD Title: (X) Delete Title: () Change () Addition ABRAMOVIC, A. MARK Name: Name: 550 ROUTE 202/206 Address: Address: City-St-Zip: BEDMINSTER, NJ 079210760 City-St-Zip: Title: (X) Delete Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: STEVEN D. OVERLY **VPSD** 04/19/2004