## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F03000006103

Entity Name: UTILITY LINES CONSTRUCTION SERVICES, INC.

FILED Mar 12, 2009 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
708 BLAIR WILLOW G	MILL RD ROVE, PA	19090			
Current Mailing Address:			New Mailir	New Mailing Address:	
708 BLAIR WILLOW G	MILL RD BROVE, PA	19090			
FEI Number:	23-2971976	FEI Number Applied For ( )	FEI Number Not Appli	cable ( ) Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
1200 SOUT	ORATION S' TH PINE ISLA ON, FL 3332	AND ROAD			
The above in the State		submits this statement for the pu	rpose of changing it	s registered office or registered agent, or both,	
SIGNATURE:					
	Electro	onic Signature of Registered Agen	t	Date	
Election Cam	paign Financi	ng Trust Fund Contribution ( ).			
OFFICERS	AND DIRE	CTORS:	ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	GRAHAM, GE 1820 VALLEY		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ASPLUNDH, E	WBROOK RD.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ST ( DWYER, JOS 419 SHOEMA LANSDALE, F	KER WAY	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	AT ( KOSYLA, GEI 484 NEW RO CHURCHVILL	AD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ASPLUNDH, 0 3700 BUCK R	) Delete CHRISTOPHER B OAD I VALLEY, PA 19006	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	(	) Delete	Title: Name: Address: City-St-Zip:	AT () Change (X) Addition BAUER, BRIAN 442 SUNSET DRIVE SOUTHAMPTON, PA 18966	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

SIGNATURE: GERALD KOSYLA AT 03/12/2009