

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 27, 2006 8:00 am**  
**Secretary of State**

02-27-2006 90082 028 \*\*\*158.75

**DOCUMENT # F05000005818**

1. Entity Name  
**WESTERN UTILITY CONTRACTORS, INC.**



Principal Place of Business  
**227 EAST LARAWAY ROAD STE D  
FRANKFORT, IL 60423**

Mailing Address  
**3475 E FOOTHILL BLVD  
PASADENA, CA 91107**

40010-



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02152006 Chg-P CR2E034 (11/05)

City & State

City & State

4. FEI Number

**36-4115277**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired



**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324**

Name

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

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete  
NAME **HAYES, JOHN F JR**  
STREET ADDRESS **227 EAST LARAWAY ROAD STE D**  
CITY-ST-ZIP **FRANKFORT, IL 60423**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **VPS** ☐ Delete  
NAME **LEMMON, RICHARD A**  
STREET ADDRESS **3475 EAST FOOTHILL BLVD**  
CITY-ST-ZIP **PASADENA, CA 91107**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **VPAS** ☐ Delete  
NAME **HAYES, TIMOTHY E**  
STREET ADDRESS **227 EAST LARAWAY ROAD STE D**  
CITY-ST-ZIP **FRANKFORT, IL 60423**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **VP** ☒ Delete  
NAME **BAYTRACK, DAN L**  
STREET ADDRESS **3475 EAST FOOTHILL BLVD**  
CITY-ST-ZIP **PASADENA, CA 91107**

TITLE ☐ Change ☒ Addition  
NAME **DAN L. BATRACK**  
STREET ADDRESS **3475 E. FOOTHILL BLVD.**  
CITY-ST-ZIP **PASADENA, CA 91107**

TITLE **VP** ☒ Delete  
NAME **BOXTRACK, SAM W**  
STREET ADDRESS **3475 EAST FOOTHILL BLVD**  
CITY-ST-ZIP **PASADENA, CA 91107**

TITLE ☐ Change ☒ Addition  
NAME **SAM W. BOX**  
STREET ADDRESS **3475 E. FOOTHILL BLVD.**  
CITY-ST-ZIP **PASADENA, CA 91107**

TITLE **T** ☐ Delete  
NAME **KING, DAVID W**  
STREET ADDRESS **3475 EAST FOOTHILL BLVD**  
CITY-ST-ZIP **PASADENA, CA 91107**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

*[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**2/16/06**

Date

Daytime Phone #

40019997

ATTACHMENT

# F0500005818

OFFICERS AND DIRECTORS OF THE CORPORATION

TITLE	NAME	COMPLETE BUSINESS MAILING ADDRESS			
		Street	City	State	Zip Code
ASST TREASURER	Teresa M. Dieguez	3475 East Foothill Blvd.	Pasadena	CA	91107
ASST TREASURER	Julie M. Nichols	227 East Laraway Road, Suite A	Frankfort,	IL	60423
DIRECTOR	Richard A. Lemmon	3475 East Foothill Blvd.	Pasadena	CA	91107