

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F06000005759

Entity Name: UTILIMAP CORPORATION

**FILED**  
**Jan 12, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1053 HEADQUARTERS PARK  
FENTON, MO 63026

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 429  
SULLIVAN, MO 63080

**New Mailing Address:**

FEI Number: 43-1939873

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

NRAI SERVICES INC  
2731 EXECUTIVE PARK DR SUITE 4  
WESTON, FL 33331 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: VCVF  
Name: EIRVIN, WENDELL C  
Address: 1053 HEADQUARTERS PARK  
City-St-Zip: FENTON, MO 63026

Title: CP  
Name: MEDLIN, REBECCA E  
Address: 1617 SOUTH SERVICE RD  
City-St-Zip: SULLIVAN, MO 63080

Title: DST  
Name: CUDNEY, KENT  
Address: 1617 SOUTH SERVICE RD  
City-St-Zip: SULLIVAN, MO 63080

I hereby 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 all other like empowered.

SIGNATURE: KENT CUDNEY

DST

01/12/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date