

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000002490

Entity Name: BELL UTILITIES, INC.

FILED
Apr 28, 2009
Secretary of State

Current Principal Place of Business:

4300 BAYOU BLVD. STE 25-B
PENSACOLA, FL 32503

New Principal Place of Business:

2700 DUPONT DR
PENSACOLA, FL 32503

Current Mailing Address:

4300 BAYOU BLVD. STE 25-B
PENSACOLA, FL 32503

New Mailing Address:

2700 DUPONT DR
PENSACOLA, FL 32503

FEI Number: 75-2854602

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLLIDAY, STEVE
4300 BAYOU BLVD. STE 25-B
PENSACOLA, FL 32503 US

Name and Address of New Registered Agent:

HOLLIDAY, STEVE
2700 DUPONT DR
PENSACOLA, FL 32503 US

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:

04/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CHRM () Delete
Name: VOSE, GARY
Address: 381 CASA LINDA PLAZA #359
City-St-Zip: DALLAS, TX 75218

Title: P () Delete
Name: VOSE, GARY
Address: 381 CASA LINDA PLAZA #359
City-St-Zip: DALLAS, TX 75218

Title: V () Delete
Name: HOLLIDAY, STEVE
Address: 4300 BAYOU BLVD. STE 25-B
City-St-Zip: PENSACOLA, FL 32503

Title: ST () Delete
Name: VOSE, GARY
Address: 381 CASA LINDA PLAZA #359
City-St-Zip: DALLAS, FL 75218

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: GARY VOSE

P

04/28/2009

Electronic Signature of Signing Officer or Director

Date