

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 14, 2002 8:00 am
Secretary of State

05-14-2002 90216 045 ***150.00

DOCUMENT # F98000003261

1. Entity Name

UTILITY PARTNERS, INC.

Principal Place of Business

**600 NORTH WESTSHORE BLVD., STE. 1200
TAMPA FL 33609**

Mailing Address

**600 NORTH WESTSHORE BLVD., STE. 1200
TAMPA FL 33609**

2. Principal Place of Business

600 N Westshore Blvd

Suite, Apt. #, etc.

Suite 990

City & State

Tampa FL

Zip

33609

Country

3. Mailing Address

600 N Westshore Blvd

Suite, Apt. #, etc.

Suite 990

City & State

Tampa FL

Zip

33609

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3516470

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

REED, TIMOTHY A

600 N. WESTSHORE BLVD., STE. 1200

TAMPA FL 33609

7. Name and Address of New Registered Agent

Name

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

600 N Westshore Blvd, Suite 990

City

Tampa

FL

Zip Code

33609

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	MAFFIE, MICHAEL O	
STREET ADDRESS	5241 SPRING MOUNTAIN RD.	
CITY-ST-ZIP	LAS VEGAS NV 89102	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	BIEHL, GEORGE C	
STREET ADDRESS	5241 SPRING MOUNTAIN RD.	
CITY-ST-ZIP	LAS VEGAS NV 89102	
TITLE	DP	<input type="checkbox"/> Delete
NAME	REED, TIMOTHY A	
STREET ADDRESS	600 NORTH WESTSHORE BLVD., STE. 1200	
CITY-ST-ZIP	TAMPA FL 33609	
TITLE	DV	<input type="checkbox"/> Delete
NAME	KENNEDY, JAMES F	
STREET ADDRESS	600 NORTH WESTSHORE BLVD., STE. 1200	
CITY-ST-ZIP	TAMPA FL 33609	
TITLE	V	<input type="checkbox"/> Delete
NAME	BROOKS, PAUL V	
STREET ADDRESS	600 NORTH WESTSHORE BLVD., STE. 1200	
CITY-ST-ZIP	TAMPA FL 33609	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	LEPARD, LARRY	
STREET ADDRESS	2 EXECUTIVE DR.	
CITY-ST-ZIP	FT. LEE NJ	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	DC	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	600 N Westshore Blvd, Suite 990	
CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	600 N Westshore Blvd, Suite 990	
CITY-ST-ZIP		
TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	600 N Westshore Blvd, Suite 990	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/02

(813) 282-8828

CR2E034 (9/01)