

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G46520

FILED
Apr 23, 2008
Secretary of State

Entity Name: INDIAN SPRINGS UTILITIES, INC.

Current Principal Place of Business:

P.O. BOX 518
CRYSTAL RIVER, FL 34423 US

New Principal Place of Business:

STATE PARK STREET
CRYSTAL RIVER, FL 34428 US

Current Mailing Address:

P.O. BOX 518
CRYSTAL RIVER, FL 34423 US

New Mailing Address:

FEI Number: 59-2336452 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHRADE, JEFFREY S
364 NW 14TH PLACE
CRYSTAL RIVER, FL 34428 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: SCHRADE, JEFFREY S
Address: 364 NW 14TH PLACE
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: VP () Delete
Name: EYSTER, JIM
Address: 10173 N SUNCOAST BLVD
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: SEC. () Delete
Name: SCHRADE, EVELYN
Address: 6283 W WESTON DR
City-St-Zip: CRYSTAL RIVER, FL 34429

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: EYSTER, JIM
Address: 570 NW 14TH PLACE
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: SEC. (X) Change () Addition
Name: SCHRADE, GABRIELA
Address: 364 NW 14TH PLACE
City-St-Zip: CRYSTAL RIVER, FL 34428

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: JEFFREY S. SCHRADE

PRES

04/23/2008

Electronic Signature of Signing Officer or Director

Date