FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H20573

(2)

Mailing Address

BENEVA CREEK UTILITY CORP.

FILED
Mar 19 1997 8:00am
Secretary of State

|--|--|--|

921 S.BENEVA		% LAWRENCE M. HANKII 921 S.BENEVA RD.					
SARASOTA FL	34232	SARASOTA FL 34232-240	JI		3. Date Incorporated or Qualified 09/12/1984	3a. Date of Last R 03/05/1996	eport
2. Principal P	lace of Business	2a, Mailing Address			4. FEI Number		plied For
21		26			59-2547722		t Applicable
Suite, Apt	#. etc.	Suite, Apt. #, etc.				¢0.75	
22		27			5. Certificate of Status Desired	Fee Re	
City & State	e	City & State			6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution	Added	to Fees
Zip	Country	Zip	Zip Country		This corporation has liability for intangible tax under s. 199.032		
24	25	29	30			Yes No	
	9, Name and Address of Curr	ent Registered Agent			10. Name and Address of New Re	gistered Agent	
	ELE, JOHN M.D.		8	I Name			1
	S. BENEVA ROAD		8	Street Add	dress (P.O. Box Number is Not Acceptab	le)	
Sahi	ASOTA FL 34232-9400		8	3			
1							01-
			8	City		FL 85 Zip	Code
11. Pursuant to office or reagent. I a	to the provisions of Sections 607.05 egistered agent, or both, in the Sta m familiar with, and accept the obl	502 and 607.1508, Florida Stati te of Florida. Such change was gations of, Section 607.0505, F	ules, the abo s authorized I Florida Statut	ve-named cor by the corpora os.	rporation submits this statement for the p ation's board of directors. I hereby accep	urpose of changing it I the appointment as	s registered registered
SIGNATURE			int to Think A		uired where eninstating)	DATE	
12.	Signature, typed or printed name of registered a OFFICERS A	ND DIRECTORS	13.	Jeni signature requ	ADDITIONS/CHANGES TO OFFIC		S IN 12
TITLE	P	DELETE	1.1 31TcE			Change	Add-tion
NAME	STEELE, JOHN	-	1.2 NAM	-		- *	_
STREET ADDRESS	921 S. BENEVA ROAD			1 ADDRESS			
CITY-ST-ZIP	SARASOTA FL		1.4 CITY	1			
TITLE	0.00.00.00	DELETE	2.1 Title	31-211		Change	Addition
NAME			2.2 NAMI				_
STREET ADDRESS				1 ADDRESS			
· .			2. 4 Cil y				
CITY-ST-ZIP TITLE		DELETE	3.1 TITLE	31-211		Change	Addition
NAME			3.2 NAM				
STREET ADDRESS				T ADDRESS			}
CHY-ST-ZIP			3.4 CITY				1
TITLE		DELETE	4.1 TITLE	- 31 - 211		Change	Addition
NAME		عادداد کے	4. 2 NAM				
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP			4.4 CITY				
TITLE		DELETE	5 1 1018			☐ Change	Addition
NAME			5.2 NAM			•	
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP TITLE		DELETE	5.4 CITY G 1 TITLE	91. ZIF		Change	Addition
		_ Otter	6.2 NAM			vqc	
NAME				j			
STREET ADDRESS				1 ADORESS			
CITY-ST-ZIP			G 4 C(1)	S1-ZIP			

14. I do 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same logal effect as if made under eath; 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 12 or Block 13 if changed, or on an attachment with an address.