FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY -1 AM 11:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J38046 (5)

1. Corporation Name
EAGLE CREEK UTILITY II, INC.

Principal Place of Business	Mailing Address
1 EAGLE CREEK DRIVE NAPLES FL 33962	1 EAGLE CREEK DRIVE NAPLES FL 33962

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 10/15/1986	3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-2728771	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired: XX	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
9. *This corporation has liability for intangible tax under S. 199.032, Florida Statutes* ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

9. Name and Address of Current Registered Agent

MEISTER, ROBERT P., JR.
1 EAGLE CREEK DR.
NAPLES FL 33962

10. Name and Address of New Registered Agent

81 Name: David J. Amico
82 Street Address (P.O. Box Number is Not Acceptable): One Eagle Creek Drive
83
84 City: Naples FL 85 Zip Code: 33962

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: [signature] DAVID J. AMICO 4/28/95
Signature, typed or printed name of Registered Agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	1.1 TITLE		☐ Change ☐ Addition
NAME	LIPS, HERBERT	1.2 NAME		
STREET ADDRESS	1 EAGLE CREEK DRIVE	1.3 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL	1.4 CITY-ST-ZIP		
TITLE	VD	2.1 TITLE		XX Change ☐ Addition
NAME	MEISTER, ROBERT P.,JR.	2.2 NAME		
STREET ADDRESS	1 EAGLE CREEK DR.	2.3 STREET ADDRESS	remove this officer & info	
CITY-ST-ZIP	NAPLES FL	2.4 CITY-ST-ZIP		
TITLE	ST	3.1 TITLE	P/S/D	X Change ☐ Addition
NAME	AMICO, DAVID J.	3.2 NAME		
STREET ADDRESS	1 EAGLE CREEK DRIVE	3.3 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL	3.4 CITY-ST-ZIP		
TITLE	CPD	4.1 TITLE	C/T/D	X Change ☐ Addition
NAME	SCHWAGER, HANSPETER	4.2 NAME		
STREET ADDRESS	1 EAGLE CREEK DRIVE	4.3 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL	4.4 CITY-ST-ZIP		
TITLE	D	5.1 TITLE		☐ Change ☐ Addition
NAME	STEINEMANN, HANSJORG	5.2 NAME		
STREET ADDRESS	1 EAGLE CREEK DRIVE	5.3 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL	5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] DAVID J. AMICO 4/28/95 (813) 775-2207
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

0930944 CP