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FILED  
May 01 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # J38046 (5)  
1. Corporation Name  
EAGLE CREEK UTILITY II, INC.



Principal Place of Business Mailing Address  
1 EAGLE CREEK DRIVE 1 EAGLE CREEK DRIVE  
NAPLES FL 33962 NAPLES FL 34113

2. Principal Place of Business 2a. Mailing Address  
21 601 Eagle Creek Drive 26 601 Eagle Creek Drive  
Suite, Apt. #, etc. Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Naples, FL 28 Naples, FL  
24 Zip 25 Country 29 Zip 30 Country  
34113 U.S.A. 34113 U.S.A.

3. Date Incorporated or Qualified 3a. Date of Last Report  
10/15/1986 05/01/1996  
4. FEI Number Applied For  
59-2728771 Not Applicable  
5. Certificate of Status Desired ☒ \$8.75 Additional  
Fee Required  
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be  
Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent  
AMICO, DAVID J  
1 EAGLE CREEK DR.  
NAPLES FL 33962

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
601 Eagle Creek Drive  
83  
84 City Naples FL 85 Zip Code 34113

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, typed or printed name of registered agent and, if applicable, (NOTE: Registered Agent's signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LIPS, HERBERT	1.2 NAME	
STREET ADDRESS	1 EAGLE CREEK DRIVE	1.3 STREET ADDRESS	601 Eagle Creek Drive
CITY-ST-ZIP	NAPLES FL	1.4 CITY-ST-ZIP	Naples, FL 34113
TITLE	PSD	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	AMICO, DAVID J.	2.2 NAME	
STREET ADDRESS	1 EAGLE CREEK DRIVE	2.3 STREET ADDRESS	601 Eagle Creek Drive
CITY-ST-ZIP	NAPLES FL	2.4 CITY-ST-ZIP	Naples, FL 34113
TITLE	CTO	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHWAGER, HANSPETER	3.2 NAME	
STREET ADDRESS	1 EAGLE CREEK DRIVE	3.3 STREET ADDRESS	601 Eagle Creek Drive
CITY-ST-ZIP	NAPLES FL	3.4 CITY-ST-ZIP	Naples, FL 34113
TITLE	D	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STEINEMANN, HANSJORG	4.2 NAME	
STREET ADDRESS	1 EAGLE CREEK DRIVE	4.3 STREET ADDRESS	601 Eagle Creek Drive
CITY-ST-ZIP	NAPLES FL	4.4 CITY-ST-ZIP	Naples, FL 34113
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 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: David J. Amico 4/23/97 (941) 775-2227

CR2E034 (9/96)