2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K95159

Entity Name: CONTINENTAL UTILITY INC.

FILED Jan 05, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 50 CONTINENTAL BLVD WILDWOOD, FL 347859701 US **Current Mailing Address: New Mailing Address:** 50 CONTINENTAL BLVD WILDWOOD, FL 347859701 US FEI Number: 59-2951306 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NANTT, DENNIS 109 FOREST BLVD WILDWOOD, FL 34785 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition NANTT, DENNIS Name: Name: 109 FOREST BLVD Address: Address: City-St-Zip: WILDWOOD, FL 34785 US City-St-Zip: Title: Title: () Delete (X) Change () Addition OWENS, KENNETH Name: SCHURR, HARRY Name: 105 LYONIA LANE 114 ROBIN LANE Address: Address: WILDWOOD, FL 34785 US WILDWOOD, FL 34785 US City-St-Zip: Citv-St-Zip: Title: () Delete Title: () Change () Addition DELAMATER, EDITH Name: Name: 503 FOREST BLVD Address: Address: City-St-Zip: WILDWOOD, FL 34785 US City-St-Zip: Title: () Delete Title: () Change () Addition TOMASELLA, LINDA Name: Name: Address: 62 SEMINOLE PATH Address: City-St-Zip: WILDWOOD, FL 34785 US City-St-Zip: Title: (X) Delete Title: () Change () Addition FIELDS, JEAN Name: Name: 3 BOBCAT TRAIL Address: Address: WILDWOOD, FL 34785 US City-St-Zip: City-St-Zip: Title: (X) Delete Title: () Change () Addition FRY, BRENT Name: Name: 102 CYPRESS RD Address: Address: City-St-Zip: City-St-Zip: WILDWOOD, FL 34785 US

I hereby certify that the information supplied with this filing does not qualify for the 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.

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SIGNATURE:	DENNIS NANTT	Р	01/05/2007