

# **2010 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# K95159

**FILED**  
**May 25, 2010**  
**Secretary of State**

**Entity Name:** CONTINENTAL UTILITY INC.

**Current Principal Place of Business:**

50 CONTINENTAL BLVD  
WILDWOOD, FL 347859701 US

**New Principal Place of Business:**

**Current Mailing Address:**

50 CONTINENTAL BLVD  
WILDWOOD, FL 347859701 US

**New Mailing Address:**

**FEI Number:** 59-2951306

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

TOMASELLO, JOSEPH  
62 SEMINOLE PATH  
WILDWOOD, FL 34785 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: TOMASELLO, JOSEPH  
Address: 62 SEMINOLE PATH  
City-St-Zip: WILDWOOD, FL 34785 US

Title: V  
Name: PABIS-MOCK, ANTOINETTE  
Address: 20 MAGNOLIA LANE  
City-St-Zip: WILDWOOD, FL 34785 US

Title: T  
Name: POGGIOLI, RANDY  
Address: 106 WINTERBERRY  
City-St-Zip: WILDWOOD, FL 34785 US

Title: S  
Name: HIGGINS, KAREN  
Address: 30 NORTH BOBWHITE RD  
City-St-Zip: WILDWOOD, FL 34785 US

Title: D  
Name: SHINER, EARL  
Address: 128 FOREST BLVD  
City-St-Zip: WILDWOOD, FL 34785

Title: D  
Name: GANDER, BILL  
Address: 88 ROBIN RD  
City-St-Zip: WILDWOOD, FL 34785

I hereby 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 all other like empowered.

**SIGNATURE:** JOSEPH TOMASELLO

P

05/25/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date