

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L00000014798

1. Entity Name

UTILITY COST CUTTERS SYSTEMS, LLC

FILED

01 MAY 21 AM 8:28

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

1126 53RD COURT  
WEST PALM BEACH FL 33460

Mailing Address

1126 53RD COURT  
WEST PALM BEACH FL 33460

2. Principal Place of Business

4255 GULF SHORE BLVD., NO.

Suite, Apt. #, etc.

#702

City & State

NAPLES, FLORIDA

Zip

34103

Country

USA

3. Mailing Address

4255 GULF SHORE BLVD., NO.

Suite, Apt. #, etc.

#702

City & State

NAPLES, FLORIDA

Zip

34103

Country

USA

4. FEI Number

94-3381604

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$5.00 Additional  
Fee Required

6. Name and Address of Current Registered Agent

HUSTON, JOHN

1126 53RD COURT

WEST PALM BEACH FL 33460

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

4255 GULF SHORE BLVD., NO., SUITE #702

City

NAPLES

FL

Zip Code

34103

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00

Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
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CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

10. ADDITIONS/CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☒ Addition  
John Huston  
1126 53rd Court 4255 Gulf Shore Blvd., No.  
Naples West Palm Beach, Florida 33460 34103

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☒ Addition  
Keith Venezie  
512 Argonne Blvd.  
Elwood City, PA 16117

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☒ Addition  
Alan Clapsaddle  
146 Duke Drive  
Lake Worth, FL 33450

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition  
900004420889-1  
-06/14/01--01104--018  
\*\*\*\*\*50.00 \*\*\*\*\*50.00

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

11. I 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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

4-9-01

0031706 SP

CR2E088 (11/00)