

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000001927

FILED
Apr 08, 2007
Secretary of State

Entity Name: NORTH SUMTER UTILITY COMPANY, L.L.C.

Current Principal Place of Business:

1020 LAKE SUMTER LANDING
THE VILLAGES, FL 32162

New Principal Place of Business:

Current Mailing Address:

1020 LAKE SUMTER LANDING
THE VILLAGES, FL 32162

New Mailing Address:

FEI Number: 59-3699283

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROY, STEVEN M
1028 LAKE SUMTER LANDING
THE VILLAGES, FL 32162 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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MORSE, H. GARY
Address: 1020 LAKE SUMTER LANDING
City-St-Zip: THE VILLAGES, FL 32162

Title: P () Delete
Name: MORSE, H. GARY
Address: 1020 LAKE SUMTER LANDING
City-St-Zip: THE VILLAGES, FL 32162

Title: VS () Delete
Name: MORSE, MARK G
Address: 1020 LAKE SUMTER LANDING
City-St-Zip: THE VILLAGES, FL 32162

Title: V () Delete
Name: ARNETT, JOHN W III
Address: 1020 LAKE SUMTER LANDING
City-St-Zip: THE VILLAGES, FL 32162

Title: T () Delete
Name: WISE, JOHN F
Address: 1020 LAKE SUMTER LANDING
City-St-Zip: THE VILLAGES, FL 32162

Title: AS () Delete
Name: ROY, STEVEN M
Address: 1028 LAKE SUMTER LANDING
City-St-Zip: THE VILLAGES, FL 32162

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 is true and accurate and that my electronic 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: H. GARY MORSE

MGR

04/08/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date