

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000024389

FILED  
Apr 16, 2009  
Secretary of State

Entity Name: FRANCIS I UTILITY, L.L.C.

## Current Principal Place of Business:

29 MIMI STREET  
SEBRING, FL 33875

## New Principal Place of Business:

## Current Mailing Address:

29 MIMI STREET  
SEBRING, FL 33875

## New Mailing Address:

FEI Number: 59-3746529

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KORP, WILLIAM  
240 S. PINEAPPLE AVE., 10TH FLOOR  
SARASOTA, FL 34236 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: P ( ) Delete  
Name: HOFFARTH, BERNARD  
Address: 336 TIGERTAIL ROAD  
City-St-Zip: SEBRING, FL 33875

Title: V ( ) Delete  
Name: KELLER, PATRICIA  
Address: 551 ADDISON ST  
City-St-Zip: SEBRING, FL 33875

Title: T ( ) Delete  
Name: ROBERTS, SUSAN  
Address: 602 SEBRING DRIVE  
City-St-Zip: SEBRING, FL 33875

Title: S ( ) Delete  
Name: CRAWLEY, MICKEY  
Address: 18 CHEROKEE ST  
City-St-Zip: SEBRING, FL 33875

Title: D ( ) Delete  
Name: ELIFRITZ, WANDA SUE  
Address: 11 CHEROKEE ST  
City-St-Zip: SEBRING, FL 33875

Title: D ( ) Delete  
Name: WHITEHEAD, JULIETTE  
Address: 509 VON MAXCY ROAD  
City-St-Zip: SEBRING, FL 33875

## ADDITIONS/CHANGES:

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

Title: V (X) Change ( ) Addition  
Name: DEMORE, TERRY  
Address: 338 TIGERTAIL ROAD  
City-St-Zip: SEBRING, FL 33875

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

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

Title: ( ) Change ( ) Addition  
Name:  
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 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: BERNARD HOFFARTH

P

04/16/2009

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