

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000024389

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

FILED  
Apr 21, 2011  
Secretary of State

**Current Principal Place of Business:**

29 MIMI STREET  
SEBRING, FL 33870

**New Principal Place of Business:**

**Current Mailing Address:**

29 MIMI STREET  
SEBRING, FL 33870

**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  
1 SARASOTA TOWER, 2 NORTH TAMIAMI TRAIL  
SUITE 500  
SARASOTA, FL 32463 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  
Name: SCHOTTENLOHER, MELVIN  
Address: 708 SUNSHINE LANE  
City-St-Zip: SEBRING, FL 33870

Title: V  
Name: ELIFRITZ, WANDA SUE  
Address: 11 CHEROKEE STREET  
City-St-Zip: SEBRING, FL 33870

Title: T  
Name: ROBERTS, SUSAN  
Address: 602 SEBRING DRIVE  
City-St-Zip: SEBRING, FL 33870

Title: S  
Name: GRANT-HART, MARJORIE  
Address: 274 TANGLEWOOD STREET  
City-St-Zip: SEBRING, FL 33870

Title: D  
Name: SMITH, QUENTIN  
Address: 473 PAULINE STREET  
City-St-Zip: SEBRING, FL 33870

Title: D  
Name: KELLER, PATRICIA  
Address: 551 ADDISON STREET  
City-St-Zip: SEBRING, FL 33870

I hereby 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: MELVIN SCHOTTENLOHER

P

04/21/2011

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