

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000044926

FILED  
Feb 23, 2005  
Secretary of State

Entity Name: FLORIDA UTILITY GROUP, LLC

## Current Principal Place of Business:

373 BRIMMING LAKE ROAD  
CLERMONT, FL 34711 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 490  
MINNEOLA, FL 34755

## New Mailing Address:

FEI Number: 20-0406479

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DILENA, DAVID M  
373 BRIMMING LAKE ROAD  
CLERMONT, FL 34711 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/MEMBERS:

Title: MGRM ( ) Delete  
Name: DILENA, DAVID M TRES  
Address: 373 BRIMMING LAKE ROAD  
City-St-Zip: CLERMONT, FL 34711 US

Title: MGR ( ) Delete  
Name: UTILITY SERVICES SPE, CIALISTS GROUP, LLC  
Address: 2 STAFFORD ST.  
City-St-Zip: STAFFORD SPRINGS, CN 06076 US

Title: MGR ( ) Delete  
Name: JERNIGAN, GENEVA SEC  
Address: 219 4TH STREET JPV  
City-St-Zip: WINTER HAVEN, FL 33880 US

Title: MGR ( ) Delete  
Name: KELSEY, DEBRA A V. PRES  
Address: 3125 BLAINE CIR  
City-St-Zip: DELTONA, FL 32738 US

Title: MGR ( ) Delete  
Name: SOARES, REBECCA PRES  
Address: 536 BRIMMING LAKE ROAD  
City-St-Zip: CLERMONT, FL 34711 US

## ADDITIONS/CHANGES:

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:

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 Section 119.07(3)(i), 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: DAVID M. DILENA

MGRM

02/23/2005

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