

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000021796

FILED
Apr 27, 2007
Secretary of State

Entity Name: CMS UTILITY SERVICES LLC

Current Principal Place of Business:

199 FERRIS DRIVE NW
PORT CHARLOTTE, FL 33952 US

New Principal Place of Business:

Current Mailing Address:

199 FERRIS DRIVE NW
PORT CHARLOTTE, FL 33952 US

New Mailing Address:

FEI Number: 65-1071901

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILSON, STANLEY E JR
199 FERRIS DRIVE NW
PORT CHARLOTTE, FL 33952 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: MGRM () Delete
Name: WILSON, STANLEY E JR
Address: 2400 ACACIA AVENUE
City-St-Zip: PUNTA GORDA, FL 33950 US

Title: MGRM () Delete
Name: WILSON, GLENN E
Address: 6959 BEECH GROVE ROAD
City-St-Zip: LEBANON JUNCTION, KY 40150 US

ADDITIONS/CHANGES:

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: STANLEY E. WILSON JR

MGRM

04/27/2007

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