

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000022216

FILED  
Apr 23, 2007  
Secretary of State

**Entity Name:** UTILITY SERVICE PROVIDER, LLC

**Current Principal Place of Business:**

4720 SALISBURY ROAD  
SUITE 52  
JACKSONVILLE, FL 32256

**New Principal Place of Business:**

22 FANCHER COURT  
SUITE 100  
ST. AUGUSTINE, FL 32080

**Current Mailing Address:**

4720 SALISBURY ROAD  
SUITE 52  
JACKSONVILLE, FL 32256

**New Mailing Address:**

22 FANCHER COURT  
SUITE 100  
ST. AUGUSTINE, FL 32080

**FEI Number:** 20-8890212

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

J. KEITH M. SANDS, P.A.  
4720 SALISBURY ROAD  
SUITE 56  
JACKSONVILLE, FL 32256 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:** CAMPBELL, DAVID F  
**Address:** 22 FANCHER, SUITE 100  
**City-St-Zip:** ST. AUGUSTINE, FL 32080

**ADDITIONS/CHANGES:**

**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:** DAVID F. CAMPBELL

MGR

04/23/2007

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