2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000043572

Entity Name: UTILITY SERVICES, LLC

41849 MAGGIE JONES RD

PAISLEY, FL 32767

Address:

City-St-Zip:

FILED Apr 20, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 919 HUGO CIR DELTONA, FL 32738 **Current Mailing Address: New Mailing Address:** 5102 MT. PLYMOUTH RD 919 HUGO CIR DELTONA, FL 32738 APOPKA, FL 32712 FEI Number: 26-2540198 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PECK, JAMES C 633 TÚSCARORA TR US MAITLAND, FL 32751 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete PECK, JAMES C Name: Name: Address: 633 TUSCARORA TR Address: City-St-Zip: MAITLAND, FL 32751 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: COX, ROBERT Name: Address: 919 HUGO CIR Address: City-St-Zip: DELTONA, FL 32738 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition COFFMAN, TERRY Name: Name: Address: 2352 JUSTY WAY Address: City-St-Zip: ORLANDO, FL 32817 City-St-Zip: () Delete Title: MGRM Title: () Change () Addition BYK, JOSEPH Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: JAMES C. PECK MGRM 04/20/2009