

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

L60039

1. Entity Name

JASMINE LAKES UTILITIES CORP.

Principal Place of Business

Mailing Address

2. Principal Place of Business

200 Corporate Center Drive

3. Mailing Address

6960 Professional Parkway E

Suite, Apt. #, etc.

Suite 300

Suite, Apt. #, etc.

Suite 400

City & State

Coraopolis, PA

City & State

Sarasota, FL

Zip
15108

Country
USA

Zip
34240

Country
USA

4. FEI Number

59-3033779

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 South Pine Island Road
Plantation, FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

Zip Code

8. 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

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P/D	<input type="checkbox"/> Delete
NAME	Donald J. Clayton	
STREET ADDRESS	11100 Brittmoore Park Drive	
CITY-ST-ZIP	Houston, TX 77041	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	Edward R. Wallace	
STREET ADDRESS	11100 Brittmoore Park Drive	
CITY-ST-ZIP	Houston, TX 77041	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VP	<input type="checkbox"/> Delete
NAME	Carey Thomas	
STREET ADDRESS	11100 Brittmoore Park Drive	
CITY-ST-ZIP	Houston, TX 77041	

TITLE	P/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Donald J. Clayton	
STREET ADDRESS	200 Corporate Center Drive, Suite 300	
CITY-ST-ZIP	Coraopolis, PA 15108	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	James A. Lahtinen	
STREET ADDRESS	200 Corporate Center Drive, Suite 300	
CITY-ST-ZIP	Coraopolis, PA 15108	
TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Martin J. Stanek	
STREET ADDRESS	200 Corporate Center Drive, Suite 300	
CITY-ST-ZIP	Coraopolis, PA 15108	
TITLE	C	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	William C. Marsh	
STREET ADDRESS	200 Corporate Center Drive, Suite 300	
CITY-ST-ZIP	Coraopolis, PA 15108	
TITLE	AS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Renee J. Cypher	
STREET ADDRESS	200 Corporate Center Drive, Suite 300	
CITY-ST-ZIP	Coraopolis, PA 15108	
TITLE	VP/AS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Carey Thomas	
STREET ADDRESS	11100 Brittmoore Park Drive	
CITY-ST-ZIP	Houston, TX 77041	

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

James A. Lahtinen

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James A. Lahtinen

Date

05-16-00 412-393-3620

Daytime Phone #

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 MAY 22 PM 4:04

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2200.00 *550.00

DO NOT WRITE IN THIS SPACE

FILED
2000 MAY 22 PM 2:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA