

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L92615

FILED  
Apr 27, 2012  
Secretary of State

**Entity Name:** BARBERA UTILITY CONTRACTING, INC.

**Current Principal Place of Business:**

165 A TAYLOR STREET  
ABERDEEN, NC 28315 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 5886  
PINEHURST, NC 28374 US

**New Mailing Address:**

**FEI Number:** 59-3117549

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ENWALL, PETER C K  
4110 NW 37TH PLACE  
SUITE B  
GAINESVILLE, FL 32606 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

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** BARBERA, LEO  
**Address:** 165 SAFFORD CT. / P. O. BOX 5886  
**City-St-Zip:** PINEHURST, NC 28374 US

**Title:** VP  
**Name:** BARBERA, CASEY  
**Address:** 3446 YOUNGS RD. / PO BOX 145  
**City-St-Zip:** SOUTHERN PINES, NC 28388 US

**Title:** T/S  
**Name:** BARBERA, CASEY  
**Address:** 3446 YOUNGS RD. / PO BOX 145  
**City-St-Zip:** SOUTHERN PINES, NC 28388 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

**SIGNATURE:** CASEY BARBERA

VP

04/27/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date