

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# M66086

**FILED**  
**Feb 18, 2011**  
**Secretary of State**

**Entity Name:** SKINNER HORIZONTAL UTILITIES SERVICE, INC.

**Current Principal Place of Business:**

1104 E. MACCLENNY AVE.  
MACCLENNY, FL 32063 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 209  
BRYCEVILLE, FL 32009 US

**New Mailing Address:**

**FEI Number:** 59-2865997      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

SKINNER, LARRY DOUGLAS  
2821 APACHE AVE  
JACKSONVILLE, FL 32210 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: SKINNER, LARRY DOUGLAS  
Address: 2821 APACHE AVE  
City-St-Zip: JACKSONVILLE, FL 32210

Title: ST  
Name: SKINNER, FRANCES REBECCA  
Address: 2821 APACHE AVE  
City-St-Zip: JACKSONVILLE, FL 32210

Title: VP  
Name: SKINNER, SAMUEL D  
Address: 6583 CR 119  
City-St-Zip: BRYCEVILLE, FL 32009

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: SAMUEL SKINNER

VP

02/18/2011

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

\_\_\_\_\_  
Date