

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M99000001671

Entity Name

SEVERN TRENT-AVATAR UTILITY SERVICES, LLC

APPROVED
AND
FILED

00 APR 18 AM 8:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

400003213514--3

-04/18/00--01105--022

****213.75 *****55.00

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 4837 Swift Road Suite, Apt. #, etc. Suite 100 City & State Sarasota, FL Zip 34231		3. Mailing Address 4837 Swift Road Suite, Apt. #, etc. Suite 100 City & State Sarasota, FL Zip 34231		4. FEI Number 76-0624421 Applied For Not Applicable	
Country U. S.		Country U. S.		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

C T Corporation System
1200 South Pine Island Road
Plantation, FL 33324

7. Name and Address of New Registered Agent

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

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS / MEMBERS		10. ADDITIONS / CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Manager Rennie T. Quinn 16337 Park Row Houston, TX 77084 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Manager Ivan S. Burrowes 16337 Park Row Houston, TX 77084 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Manager Meg M. Water 16337 Park Row Houston, TX 77084 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Manager Joseph A. Graziose 16337 Park Row Houston, TX 77084 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Manager Gerald S. Allen 4837 Swift Road, Suite 100 Sarasota, FL 34231 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. 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 is true and accurate and that my 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Gerald S. Allen

March 24, 2000 941-925-3088

Date

Daytime Phone #

CR2E083 (11/99)