

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32590

FILED
Feb 24, 2012
Secretary of State

Entity Name: UTILITY CONTRACTORS ASSOCIATION OF NORTH FLORIDA INC.

Current Principal Place of Business:

12842 HUNTLEY MANOR DRIVE
JACKSONVILLE, FL 32224 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 16810
JACKSONVILLE, FL 32245 US

New Mailing Address:

FEI Number: 59-2950586

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ATWELL, LAUREN
5634 W. 5TH STREET
JACKSONVILLE, FL 32254 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: D
Name: ATWELL, LAUREN
Address: 5634 W. 5TH STREET
City-St-Zip: JACKSONVILLE, FL 32254

Title: P
Name: BRYAN, KIMBERLY
Address: 1025 BLASIVUS ROAD
City-St-Zip: JACKSONVILLE, FL 32226

Title: D
Name: WOODALL, MICHAEL
Address: P.O. BOX 60218
City-St-Zip: JACKSONVILLE, FL 32236

Title: D
Name: ZEBOUNI, ANTHONY
Address: 9905 ST. AUGUSTINE ROAD STE 400
City-St-Zip: JACKSONVILLE, FL 32257

Title: D
Name: PORTER, ED
Address: 7587 WILSON BLVD
City-St-Zip: JACKSONVILLE, FL 32210

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KIM BRYAN

P

02/24/2012

Electronic Signature of Signing Officer or Director

Date