

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000104209

FILED
Feb 23, 2004
Secretary of State

Entity Name: UTILITY DATA SYSTEMS, INC.

Current Principal Place of Business:

306 RED ELM PL
SEFFNER, FL 33584

New Principal Place of Business:

Current Mailing Address:

306 RED ELM PL
SEFFNER, FL 33584

New Mailing Address:

FEI Number: 59-3759421

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERRYMAN, F.R.
4405 W NORTH A STREET
TAMPA, FL 33609

Name and Address of New Registered Agent:

BERRYMAN, F.R.
306 RED ELM PLACE
SEFFNER, FL 33584

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:

02/23/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BERRYMAN, F.R.
Address: 4405 W NORTH A STREET
City-St-Zip: TAMPA, FL 33609

Title: D () Delete
Name: GEM, ALEXANDER J
Address: 4608 PRICE AVE
City-St-Zip: TAMPA, FL 33611

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BERRYMAN, F.R.
Address: 306 RED ELM PLACE
City-St-Zip: SEFFNER, FL 33584

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: F.R. BERRYMAN

D

02/23/2004

Electronic Signature of Signing Officer or Director

Date