2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2009
Secretary of State

DOCUMENT# P04000049382

Entity Name: ORANGE BLOSSOM UTILITIES, INC.

Current Principal Place of Business:

108 S OLD DIXIE HWY
LADY LAKE, FL 32159

New Principal Place of Business:

117 N US HWY 441
SUITE B
LADY LAKE, FL 32159

Current Mailing Address:

P.O. BOX 217
LADY LAKE, FL 32158

New Mailing Address:

FEI Number: 20-2434465 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STEINMETZ, NANCY P
108 S OLD DIXIE HWY
LADY LAKE, FL 32159 US

Name and Address of New Registered Agent:

STEINMETZ, NANCY P
117 N US HWY 441
SUITE B
LADY LAKE, FL 32159 US

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: _____ 04/06/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: STEINMETZ, NANCY P
Address: 108 S. OLD DIXIE HWY
City-St-Zip: LADY LAKE, FL 32159

Title: V ( ) Delete
Name: DEAN, JONATHAN
Address: 230 NE 25TH AVENUE
City-St-Zip: OCALA, FL 34470

Title: V ( ) Delete
Name: STEINMETZ, NEIL
Address: 108 S. OLD DIXIE HWY
City-St-Zip: LADY LAKE, FL 32159

Title: V ( ) Delete
Name: STEINMETZ, STEPHEN
Address: 108 S. OLD DIXIE HWY
City-St-Zip: LADY LAKE, FL 32159

Title: ST ( ) Delete
Name: O'BRIEN, SUSAN
Address: 108 S. OLD DIXIE HWY
City-St-Zip: LADY LAKE, FL 32159

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: STEINMETZ, NANCY P
Address: 117 N US HWY 441
City-St-Zip: LADY LAKE, FL 32159

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

Title: V (X) Change ( ) Addition
Name: STEINMETZ, NEIL
Address: 3718 LAKE GRIFFIN RD
City-St-Zip: LADY LAKE, FL 32159

Title: V (X) Change ( ) Addition
Name: STEINMETZ, STEPHEN
Address: 5409 GREENBRIAR DR
City-St-Zip: LADY LAKE, FL 32159

Title: ST (X) Change ( ) Addition
Name: O'BRIEN, SUSAN
Address: 3910 OAK POINTE DR
City-St-Zip: LADY LAKE, FL 32159

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: SUSAN O'BRIEN ST 04/06/2009
Electronic Signature of Signing Officer or Director — Date