2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2005
Secretary of State

DOCUMENT# P04000084217

Entity Name: SITE & UTILITY SOLUTIONS, INC.

Current Principal Place of Business:

204 E. KATHY LANE
FREEPORT, FL 32439 US

New Principal Place of Business:

210 GOVERNMENT AVENUE
NICEVILLE, FL 32578 US

Current Mailing Address:

204 E. KATHY LANE
FREEPORT, FL 32439 US

New Mailing Address:

PO BOX 749
NICEVILLE, FL 32588 US

FEI Number: 32-0118330 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SPEEGLE, PATRICIA F
204 E. KATHY LANE
FREEPORT, FL 32439 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P D ( ) Delete
Name: SPEEGLE, TROY D
Address: 204 E. KATHY LANE
City-St-Zip: FREEPORT, FL 32439 US

Title: VP D ( ) Delete
Name: SPEEGLE, JAMES T
Address: 3790 RAINEY RD.
City-St-Zip: TITUSVILLE, FL 32780 US

Title: STD ( ) Delete
Name: SPEEGLE, PATRICIA F
Address: 204 E. KATHY LANE
City-St-Zip: FREEPORT, FL 32439 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: PATRICIA F. SPEEGLE P 04/08/2005
Electronic Signature of Signing Officer or Director Date