

# **2012 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P04000139913

**FILED**  
**Sep 12, 2012**  
**Secretary of State**

**Entity Name:** ADVANCED UTILITY SERVICE, INC.\*\*\*\*\*

**Current Principal Place of Business:**

965 MATHERS STREET  
MELBOURNE, FL 32935 US

**New Principal Place of Business:**

7640 N. WICKHAM RD  
MELBOURNE, FL 32940 US

**Current Mailing Address:**

965 MATHERS STREET  
MELBOURNE, FL 32935 US

**New Mailing Address:**

PO BOX 411449  
MELBOURNE, FL 32941 US

**FEI Number:** 20-1721118

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DALTON, DAVID M  
965 MATHERS STREET  
MELBOURNE, FL 32935 US

**Name and Address of New Registered Agent:**

HEALEY, PATRICK ESQ  
1759 WEST NASSAU BLVD  
MELBOURNE, FL 32901 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: PATRICK HEALY

09/12/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PST  
Name: HALEY, MYRA  
Address: 7640 N. WICKHAM RD  
City-St-Zip: MELBOURNE, FL 32940 US

Title: D  
Name: HALEY, MYRA  
Address: 7640 N. WICKHAM RD  
City-St-Zip: MELBOURNE, FL 32940 US

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

SIGNATURE: MYRA HALEY

PSTD

09/12/2012

Electronic Signature of Signing Officer or Director

Date