2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000121906

Entity Name: UTILITY CONTRACTORS & CONSULTING, INC.

FILED Feb 10, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

ONE SAN JOSE PLACE 3832-10 BAYMEADOWS ROAD

SUITE 15 SUITE 325

JACKSONVILLE, FL 32257 JACKSONVILLE, FL 32217

Current Mailing Address: New Mailing Address:

ONE SAN JOSE PLACE 3832-10 BAYMEADOWS ROAD

SUITE 15 SUITE 325

JACKSONVILLE, FL 32257 JACKSONVILLE, FL 32217

FEI Number: 20-5604643 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GILMER, SHANNON L
ONE SAN JOSE PLACE
3832-10 BAYMEADOWS ROAD

SUITE 12 SUITE 325
JACKSONVILLE, FL 32257 US SUITE 325
JACKSONVILLE, FL 32217 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: SHANNON L GILMER 02/10/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

Name: GILMER, SHANNON L
Address: ONE SAN JOSE PLACE, SUITE 12
Name: GILMER, SHANNON L
Address: 3832-10 BAYMEADOWS RD, SUITE 325

City-St-Zip: JACKSONVILLE, FL 32257 City-St-Zip: JACKSONVILLE, FL 32217

Title: SEC () Delete Title: SEC (X) Change () Addition Name: GILMER, SHANNON L Name: GILMER, SHANNON L

Address: ONE SAN JOSE PLACE, SUITE 12 Address: 3832-10 BAYMEADOWS RD, SUITE 325

City-St-Zip: JACKSONVILLE, FL 32257 City-St-Zip: JACKSONVILLE, FL 32217

Name: GILMER, SHANNON L Name: GILMER, SHANNON L

Address: ONE SAN JOSE PLACE, SUITE 12 Address: 3832-10 BAYMEADOWS ROAD, SUITE 325

City-St-Zip: JACKSONVILLE, FL 32257 City-St-Zip: JACKSONVILLE, FL 32217

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: SHANNON L GILMER PRES 02/10/2008