

2007 FOR PROFIT CORPORATION ANNUAL REPORT

550

DOCUMENT # P07941

1. Entity Name
CHESAPEAKE UTILITIES CORPORATION



Principal Place of Business
909 SILVER LAKE BLVD
DOVER, DE 19904 US

Mailing Address
PO BOX 615
DOVER, DE 19903-0615 US

FILED

07 MAY 30 PM 12: 57

STATE
TALLAHASSEE, FLORIDA



05152007 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

- City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

51-0064146

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYES STREET
TALLAHASSEE, FL 32301

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00
Due by September 14, 2007

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE C ☐ Delete
NAME ADKINS, RALPH J.
STREET ADDRESS 909 SILVER LAKE BLVD
CITY-ST-ZIP DOVER, DE

TITLE D ☒ Delete
NAME JARDINE, JOHN W., JR.
STREET ADDRESS 909 SILVER LAKE BLVD
CITY-ST-ZIP DOVER, DE

TITLE AT ☐ Delete
NAME COOPER, BETH
STREET ADDRESS 909 SILVER LAKE BLVD.
CITY-ST-ZIP DOVER, DE

TITLE SVP ☒ Delete
NAME BAREFOOT, PHILIP S.
STREET ADDRESS 909 SILVER LAKE BLVD
CITY-ST-ZIP DOVER, DE

TITLE VS ☒ Delete
NAME BOYLES, WILLIAM C
STREET ADDRESS 909 SILVER LAKE BLVD
CITY-ST-ZIP DOVER, DE

TITLE P ☐ Delete
NAME SCHIMKAITIS, JOHN R.
STREET ADDRESS 909 SILVER LAKE BLVD
CITY-ST-ZIP DOVER, DE

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Michael P. McVasters, VP ☐ Change ☒ Addition
NAME
STREET ADDRESS 909 Silver Lake Blvd
CITY-ST-ZIP Dover, DE

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 400104261674
CITY-ST-ZIP 06/12/07--01025--021 **1150.00

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

5/17/07

(302)

734-6799