

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000087737

FILED
Sep 08, 2009
Secretary of State

Entity Name: UTILITY SERVICES OF NORTH AMERICA, INC.

Current Principal Place of Business:

7851 BLUE SPRING DRIVE
LAND O' LAKES, FL 34637

New Principal Place of Business:

Current Mailing Address:

7851 BLUE SPRING DRIVE
LAND O' LAKES, FL 34637

New Mailing Address:

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

Name and Address of Current Registered Agent:

THOMPSON, RANDY L
7851 BLUE SPRING DRIVE
LAND O' LAKES, FL 34637 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 () Delete
Name: THOMPSON, RANDY L
Address: 14641 CORAL BERRY DRIVE
City-St-Zip: TAMPA, FL 33626

Title: VP () Delete
Name: CAMPBELL, LAURENCE C
Address: 2 CANYON CEDAR
City-St-Zip: LITTLETON, CO 80127

Title: SEC () Delete
Name: THOMPSON, MONICA J
Address: 7851 BLUE SPRING DRIVE
City-St-Zip: LAND O' LAKES, FL 34637

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: THOMPSON, RANDY L
Address: 7851 BLUE SPRING DRIVE
City-St-Zip: LAND O' LAKES, FL 34637 US

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 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: LAURENCE CAMPBELL

VP

09/08/2009

Electronic Signature of Signing Officer or Director

Date