

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT 1995	 FLORIDA DEPARTMENT OF STATE Sandra B. Montem Secretary of State DIVISION OF CORPORATIONS
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**APPROVED
AND
FILED**

95 MAY -1 AM 9:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P92000005322 (2)

1. Corporation Name

UTILITY AUDIT SERVICE, INC.

Principal Place of Business

**8038 LAKEPOINT DR.
PLANTATION FL 33322
US**

Mailing Address

**8038 LAKEPOINTE DR
PLANTATION FL 33322
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 11/13/1992	3a. Date of Last Report 05/01/1994
4. FEI Number 65-0421115	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. Have you ever been convicted for a felony involving the receipt of money? Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business	2a. Mailing Address
21 214 S. ORLANDO AVE	26 214 S. ORLANDO AVE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23 COCOA BEACH, FL	28 COCOA BEACH, FL
Zip	Zip
24 32931	29 32931
25 US	30 US

9. Name and Address of Current Registered Agent

**JACOBS, TERRY N
8038 LAKE POINT DR
PLANTATION FL 33322**

10. Name and Address of New Registered Agent

81 Name JACOBS, TERRY N.
82 Street Address (P.O. Box Number is Not Acceptable) 214 S. ORLANDO AVE.
83
84 City COCOA BEACH
FL 85 Zip Code 32931

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Signature of registered agent or registered agent in charge

Signature of corporation's authorized officer or director

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
	DPST		JACOBS, TERRY N
STREET ADDRESS	8038 LAKEPOINT DR.	1.3 STREET ADDRESS	214 S. ORLANDO AVE
CITY, ST, ZIP	PLANTATION FL	1.4 CITY, ST, ZIP	COCOA BEACH, FL 32931
TITLE	NAME	2.1 TITLE	2.2 NAME
STREET ADDRESS		2.3 STREET ADDRESS	
CITY, ST, ZIP		2.4 CITY, ST, ZIP	
TITLE	NAME	3.1 TITLE	3.2 NAME
STREET ADDRESS		3.3 STREET ADDRESS	
CITY, ST, ZIP		3.4 CITY, ST, ZIP	
TITLE	NAME	4.1 TITLE	4.2 NAME
STREET ADDRESS		4.3 STREET ADDRESS	
CITY, ST, ZIP		4.4 CITY, ST, ZIP	
TITLE	NAME	5.1 TITLE	5.2 NAME
STREET ADDRESS		5.3 STREET ADDRESS	
CITY, ST, ZIP		5.4 CITY, ST, ZIP	
TITLE	NAME	6.1 TITLE	6.2 NAME
STREET ADDRESS		6.3 STREET ADDRESS	
CITY, ST, ZIP		6.4 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 116.02(2)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 this corporation or the receiver or trustee empowered to execute this report as required by Chapter 187, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/95