## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**FILED** Apr 24 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # P93000066425 (8) H20 UTILITY SERVICES, INC. Principal Place of Business Mailing Address YELS U.S. HIGHWAY 19 1518 U.S. HWY\_18 DO NOT WRITE IN THIS SPACE HOLIDAY FE SHEET 3. Date incorporated or Qualified 09/16/1993 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 1817 U.S. HIGHWAY 19 Suite, Apt. #, etc. 1817 U.S. HIGHWAY 19 59-3219789 Not Applicable Suite, Apt. #, etc \$8.75 Additional X 5. Certificate of Status Desired Fee Required 27 City & State \$5.00 May Be 6. Election Campaign Financing HOLI DAY 23 28 **Trust Fund Contribution** Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible US 34691 US Personal Property Tax due June 30. Yes Yes 24 25 29 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name DEREMER, GARY 10441-LEANING OAK-BRIVE Street Address (P.O. Box Number is Not Acceptable) 5537 SEAFOREST DR. PORT RICHET FL 34668 63 UNIT #302 34652 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, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS DELETE 1.1 TITLE Addition TITLE Change Deremer, gary 1.2 NAME NAME 10411 LEANING OAK DR STREET ADDRESS 1.3 STREET ADDRESS PORT RICHEY FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change ☐ Addition 2.1 TITLE TITLE HINES, JEFFREY G 2.2 NAME NAME **671 WANETA COURT** STREET ADDRESS 2.3 STREET ADDRESS WINTER SPRINGS FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3 4. CITY - ST-ZIP DELETE Addition Change TITLE 4.1 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY - ST - ZIP DELETE Addition TITLE 5 1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADORESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition 6.1 TITLE TITLE

6.2 NAME

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 the corporation or the recorder trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

6.3 STREET ADDRESS

4-14-98

NAME

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

Block 12 or Block 13 if changed, or on an a