

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000053029 (1)

1. Corporation Name

BUDGET UTILITY SERVICE, INC.



Principal Place of Business

8081 NORMANDY BLVD., #6  
JACKSONVILLE FL 32221

Mailing Address

8081 NORMANDY BLVD., #6  
JACKSONVILLE FL 32221

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

P.O. Box 62285

Jax., Fla.  
32219

22

City & State

27

City & State

23

Zip

Country

28

Jax., Fla.

24

25

29

32219

30

Country

g. Name and Address of Current Registered Agent

JOHNSON, DAVID E  
8081 NORMANDY BLVD., #6  
JACKSONVILLE FL 32221

81 Name

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

83

84 City

FL

85 Zip Code

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

David E. Johnson

David E. Johnson

3-31-96

DATE

12. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

D  
JOHNSON, DAVID E  
8081 NORMANDY BLVD., #6  
JACKSONVILLE FL 32221

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

DELETE

TITLE  
NAME  
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CITY - ST - ZIP

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NAME  
STREET ADDRESS  
CITY - ST - ZIP

DELETE

13.

1. TITLE  
12 NAME  
13 STREET ADDRESS  
14 CITY - ST - ZIP

2. TITLE  
22 NAME  
23 STREET ADDRESS  
24 CITY - ST - ZIP

3. TITLE  
32 NAME  
33 STREET ADDRESS  
34 CITY - ST - ZIP

4. TITLE  
42 NAME  
43 STREET ADDRESS  
44 CITY - ST - ZIP

5. TITLE  
52 NAME  
53 STREET ADDRESS  
54 CITY - ST - ZIP

6. TITLE  
62 NAME  
63 STREET ADDRESS  
64 CITY - ST - ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

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 119.07(3)(k), 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

David E. Johnson

David E. Johnson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-31-96

DATE

904-781-9200

Corporate Phone #

CR2E034 (12/95)