

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000087432

FILED
Jan 05, 2006
Secretary of State

Entity Name: PIONEER UNDERGROUND UTILITIES, INC.

Current Principal Place of Business:

524 S COMBEE RD.
LAKELAND, FL 33801 US

New Principal Place of Business:

Current Mailing Address:

524 S COMBEE RD.
LAKELAND, FL 33801 US

New Mailing Address:

FEI Number: 59-3347757

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALBRITTON, ORAIN
2818 BOLL WEEVIL RD.
NOCATEE, FL 34268 US

Name and Address of New Registered Agent:

ALBRITTON, MANARD O
524 S COMBEE RD.
LAKELAND, FL 33801 US

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: MANARD O ALBRITTON

01/05/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ALBRITTON, NORMA
Address: 2818 BOLL WEEVIL RD.
City-St-Zip: NOCATEE, FL 34268

Title: ST () Delete
Name: ALBRITTON, ORAIN
Address: 2818 BOLL WEEVIL RD.
City-St-Zip: NOCATEE, FL 34268

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: ALBRITTON, NORMA L
Address: 524 S COMBEE RD.
City-St-Zip: LAKELAND, FL 33801

Title: ST (X) Change () Addition
Name: ALBRITTON, MANARD O
Address: 524 S COMBEE RD.
City-St-Zip: LAKELAND, FL 33801

I hereby certify that the information supplied with this filing does not qualify for the 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: NORMA LAVERN ALBRITTON

DP

01/05/2006

Electronic Signature of Signing Officer or Director

Date