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

PROFIT CORPORATION ANNUAL REPORT

1997



SIGNATURE: PO SIGNATURED

FLORIDA DEPARTMENT OF STATE

FILED

May 15 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000006956 (2)

WEDGEFIELD UTILITIES, INC.

Principal Place of Business Mailing Address 200 WEATHERSFIELD AVE 200 WEATHERSFIELD AVE ALTAMONTE SPRINGS FL 32714-4027 ALTAMONTE SPRINGS FL 32714 3. Date Incorporated or Qualified 3a. Date of Last Report 01/23/1996 2a. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For -4071 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution 28 Added to Fees Ziο Country Zip Country This corporation has liability for intangible jax under s. 199.032. Florida Statutes Yes No.

10. Name and Address of New Registered Agent 24 30 25 29 9. Name and Address of Current Registered Agent 81 Name RASMUSSEN, DONALD UTILITIES, INC. **B2** Street Address (P.O. Box Number is Not Acceptable) 200 WEATHERSFIELD AVE 83 ALTAMONTE SPRINGS FL 32714 City 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 land accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE Signature, typical or printed name of registered agent and title if applicable (NOTE: Registered Agent eignature required when reinstating) (96/6) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE Change Addition 11 Tiffle TPUE Vice President Rasmussen, Donald 1.2 NAME E034 NAME 200 Weathersfield Avenue 1.3 STREET ADDRESS STREET ADDRESS Altamonte Springs, FL 32714 1.4 CITY-ST-ZIP CHTY+S1+7# DELETE Change Addition Trb F 21 TITLE Chairman & CEO 2.2 NAME Camaren, James L. 2.3 STREET ADDRESS STREET ADORESS 2335 Sanders Road Northbrook, IL 60062 2 4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE Change Addition THUE 3.1 TITLE Senior Vice President 3.2 NAME Demaree, David H. STREET ADDRESS. 3.3 STREET ADDRESS 2335 Sanders Road Northbrook, IL 60062 3.4. CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition TIME 4.1 TITLE President NAMI 4. 2 NAME Schumacher, Lawrence N. STREET ADURESS 4.3 STREET ADDRESS 2335 Sanders Road CITY-ST-ZIP 4.4 CITY - ST - ZIP Northbrook, IL 60062 DELETE Change Addition 5.1 TITLE Vice President NAM: 5.2 NAME Wenz, Carl J. 5.3 STREET ADDRESS STREET ADDRESS 2335 Sanders Road Northbrook, IL 60062 CITY 51-21P 5.4 CITY-ST-ZIP DELETE 61 TITLE Change Addition Till F Vice President 62 NAME NAM! Dopuch, Andrew N. STREET ADDRESS. 6.3 STREET ADDRESS 2335 Sanders Road CITY-ST-ZIP

Northbrook, II. 60062

14. I do 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name