DOCUMENT # **P96000006956** 1. Entity Name

Principal Place of Business

WEDGEFIELD UTILITIES, INC.

Mailing Address

FILED May 03, 2000 8:00 am Secretary of State

05-03-2000 90010 030 ***150.00

Suite, Apt. #, etc. Suite, Ap	200 WEATHERS	SFIELD AVE PRINGS FL 32714	200 WEATHERSFIELD AVE ALTAMONTE SPRINGS FL 32714-4027									
Suite, Apl. #, etc	•							ORAH ORAH DERM		KE BYN HED		
City & State City & State City & State City & State Country Country Country Country Sa. Replaced For Not Applicable \$8.75 Adopticable \$8	2. Principal Place of Business		3. Mailing Address									
Zip Country Zip Country 5. Certificate of Status Desired \$8.75 Additional Fee Required Agent 7. Name and Address of New Registered Agent Fee Required Agent 7. Name and Address of New Registered Agent Fee Required Agent 1. The Address of New Registered	Suite, Apt.	#, etc.	Suite, Apt. #, etc.				DO NOT WRIT	E IN THIS SF	PACE			
Exp. Country Zip Country S. Certificate of Status Desired \$8.75 Additional Fee Regulated \$8.75	City & State	9	City & State			4. F	4. FE! Number 36-4071705					
RASMUSSEN, DONALD UTILITIES, INC. 200 WEATHERSFIELD AVE ALTAMONTE SPRINGS FL 32714 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fordia. SIGNATURE 9. This corporation is elegible 200 Satisfy its Intrangible Tax filling requirements and elegible 200 do so. (See oriente 201 Sealed) 10. Election Campaign Financing Trust Hund Contribution 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ITHE RASMUSSEN, DONALD SIRRET ADDRESS CITY-S1-2P 11. COPPORTED AVE SIRRET ADDRESS CITY-S1-2P 11. COPPORTED AVE SIRRET ADDRESS CITY-S1-2P 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ITHE RASMUSSEN, DONALD SIRRET ADDRESS CITY-S1-2P 10. Election Campaign Financing Trust Hund Contribution 10. Election Campaign Financing Trust Hund Contribution 10. Election Campaign Financing Trust Hund Contribution 11. OFFICERS AND DIRECTORS IN 11 ITHE RASMUSSEN, DONALD SIRRET ADDRESS CITY-S1-2P 10. Election Campaign Financing Trust Hund Contribution 10. Election Campaign Financing Trust Hund Contributi	Zip	Country	Country Zip C		y	5. (Certificate of Status Desired					
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TITLE S, INC. 200 WEATHERSFIELD AVE ALTAMONTE SPRINGS FL 32714 City						Name						
TITLE S, INC. 200 WEATHERSFIELD AVE ALTAMONTE SPRINGS FL 32714 City	RASMUSSEN, DONALD				Street Address (PO Box Number is Not Acceptable)							
ALTAMONTE SPRINGS FL 32714 City FL Zip Code 8. 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 9. This corporation is eligible, or salishing requirement and elects to do so. (See criteria on both). In that state agent and title if approache (See criteria on both). In the State of Florida. FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State ITILE VP: See Criteria on both. In the State of Florida. State Indiana. OFFICERS AND DIRECTORS IN 11 TITLE VP: See Criteria on both. In the State of Florida. State Indiana. OFFICERS AND DIRECTORS IN 11 TITLE VP: See Criteria on both. In the State of Florida. State Indiana. OFFICERS AND DIRECTORS IN 11 TITLE VP: See Criteria on both. In the State of Florida. State Indiana. OFFICERS AND DIRECTORS IN 11 TITLE VP: See Criteria on both. In the State of Florida. State Indiana. OFFICERS AND DIRECTORS IN 11 TITLE VP: See Criteria on both. In the State of Florida. State Indiana. OFFICERS AND DIRECTORS IN 11 TITLE VP: See Criteria on both. In the State of Florida. State Indiana. OFFICERS AND DIRECTORS IN 11 TITLE VP: See Criteria on both. In the State of Florida. State Indiana. OFFICERS AND DIRECTORS IN 11 TITLE OED Delete ITILE VP: See Criteria on State Indiana. ORTHOROUGH IN TITLE VP: See Criteria on State Indiana. ORTHOROUGh IN TITLE VP: See Criteria on State Indiana. ORTHOROUGh IN TITLE VP: See Criteria on State Indiana. ORTHOROUGh IN TITLE VP: See Criteria. ORTHOROUGh IN TITLE VP: See Criteria. ORTHOROUGh IN TITLE VP: See Delete TITLE ORTHOROUGh IN					and the second of the second o							
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13. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is tour and that paysignature shall have the same legal effect as if made under oath; that I am an officer or director	13. I hereby 0	certify that the information supplied with t	this filing does not qualify for	r the exer	notion stated	d in Section	119.07(3)(i), Florida Statutes.	further certi	fy that the in	nformation	1	

with all other like empoyered. of the corporation or the receiver or trustee or changed, or on an attachment with an address

SIGNATURE:

4/4/2000

847-498-6440

Daytime Phone #