

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000035763

FILED
Jan 12, 2004
Secretary of State

Entity Name: ACCURATE UTILITIES, INC.

Current Principal Place of Business:

880 SW ST. LUCIE WEST
PORT SAINT LUCIE, FL 34986 US

New Principal Place of Business:

Current Mailing Address:

880 SW ST LUCIE WEST BLVD
PORT SAINT LUCIE, FL 34986 US

New Mailing Address:

FEI Number: 65-0672774

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WHITESIDE, DAVID S
880 SW ST. LUCIE WEST BLVD.
PORT SAINT LUCIE, FL 34986 US

Name and Address of New Registered Agent:

WHITESIDE, DAVID E
880 SW ST. LUCIE WEST BLVD.
PORT SAINT LUCIE, FL 34986 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: DAVID WHITESIDE

01/12/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WHITESIDE, DAVID E
Address: 880 SW ST. LUCIE WEST BLVD.
City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: VP () Delete
Name: WHITESIDE, STEPHANIE R
Address: 880 SW ST. LUCIE WEST BLVD.
City-St-Zip: PORT SAINT LUCIE, FL 34986

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WHITESIDE, DAVID E
Address: 880 SW ST. LUCIE WEST BLVD.
City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DAVID WHITESIDE

P

01/12/2004

Electronic Signature of Signing Officer or Director

Date