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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

May 13 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P97000079799 (7)

JD UTILITIES, INC.

00 011						
Principal Plac	o of Rusinoss	Mailing Addrose				
			Mailing Address			
902 SPARRON PALMI HARBO			602 SPARROW AVE PALM HARBOR FL 34683			
						DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
6 Discussion	loop of During		I D. Marker Addition			09/15/1997
-	lace of Business	 η	2a. Mailing Address			4. FEI Number
Suite, Apt.	#. elc		Suite, Apt. #, etc.			— CQ 75 Additional
22		27				5. Certificate of Status Desired Fee Required
City & State	6		City & State			6. Election Campaign Financing \$5.00 May Be
23		28	28			Trust Fund Contribution Added to Fees
Zip	Zip Country		Zip Cou		ry	8. This corporation owes or has paid the current year Intangible
24	25 29 30		30		Personal Property Tax due June 30. Yes No	
	9. Name and Address of Curre	nt Registered	Agent	8	1 Nome	10. Name and Address of New Registered Agent
	NDURAND, JAMES			l°	1 Name	
602 SPARROW AVE				8	2 Street Addr	ess (P.O. Box Number is Nut Accontable)
PAI	LM HARBOR FL 34683			-	3	
]*	3	į
				8	4 City	FL 85 Zin Corin
44 Purcuant	to the provisions of Sections 607.05	02 and 607 15	08 Florida Statu	ites the abo		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submittainis 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 Signature, typed to provide name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE						
12.	OFFICERS AT	ND DIRECTOR	3	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PSD		DELETE	1.1 TiTL1		☐ Change ☐ Addition
NAME	DANDURAND, JEFFERY			1.2 NAM	E	
STREET ADDRESS	4823 LONGWOOD AVE			1.3 STRE	ET ADDRESS	
CITY-ST-ZIP	HOLIDAY FL 34690			1.4 CITY	- \$T- ZIP	
TITLE	VTD		DELETE	2.1 TITLE		Change Addition
NAME			2.2 N		E	
STREET ADDRESS	BALLI HADDOD DI AAAAA				ET ADDRESS	
CITY-ST-ZIP	PALM HARBOR FL 34683		DELETE		'- ST- ZIP	Observa Addition
TITLE				3.1 TITLE	1	Change Addition
NAME				3.2 NAM		
STREET ADDRESS					ET ADDRESS	
CITY-ST-ZIP TITLE			DELETE	4.1 TITLE	'-\$1-ZIP	☐ Change ☐ Addition
NAME				4. 2 NAM	1	
STREET ADDRESS					ET ADDRESS	
CITY-ST-ZiP				4.4 CITY	· · · · · ·	
TITLE			DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME				5.2 NAM	E	
STREET ADDRESS				5.3 STRE	ET ADDRESS	
CITY-ST-ZIP				5.4 CITY	-ST-ZIP	
TITLE			DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME				6.2 NAM	E	
STREET ADDRESS				6.3 STRE	ET ADDRESS	
CITY-ST-ZIP				6.4 CITY		
14. Thereby 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 appears in Block 12 or Block 13 il changed, or on an attachment with an address.						