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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9800000007 (8)

ECHOLS METERING SERVICE, INC.

FILED Apr 17 1998 8:00am Secretary of State



Principal Place	of Business	Mailing Address				1			
2100 DURHAN	I COURT	2100 DURHAM COURT							
MT. DORA FL		MT. DORA FL 32757	MT. DORA FL 32757			D 0 105 1/0/75 III 71/10 00 405			
						DO NOT WRITE IN TH	HIS SPACE		
						3. Date Incorporated or Qualified			
						12/31/1997			
2. Principal Pl	ace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number		Applied For	
21		26 P.O. BOX 19	26 P.O. BOX 1459			59-3482418		Not Applicable	
Suite, Apt. (#. etc.		Suite, Apt. #, etc.				\$8.	.75 Additional	
22		27				5. Certificate of Status Desired		ee Required	
City & State			City & State			6 Floation Compaign Financing		5.00 May Be	
*			28 Mt Dora FL			6. Election Campaign Financing Trust Fund Contribution		dded to Fees	
23	Country Zip Cou			ntru					
Zip	⊢ ′		\vdash	us,	Λ	8. This corporation owes or has paid the		ear intangible	
24		29 32757	30	USI	<u> </u>	Personal Property Tax due June 30.	✓ Yes		
	9. Name and Address of Currer	nt Registered Agent		41.		10. Name and Address of New Register	ea Agent		
CLO	o se , thomas l			81 1	Name				
1308 S.E. 8TH AVE.				82 Street Address (P.O. Box Number is Not Acceptable)					
1		Jueer Addit			identities (1.0. Day Hornbor to Hor Accoptance)				
	EECHOBEE FL 34972		İ	83			·· 		
			[84 (City	1	=L 85	Zip Code	
							_		
11. Pursuant t	o the provisions of Sections 607.050	32 and 607.1508, Florida Statu	ites, the at	ove-n	named (corporation submits this statement for the purpos	se of chang annointme	ing its registered	
agent. I ar	n fa miliar with, and accept the oblig	ations of, Section 607.0505, F	Iorida Stati	utes.	ic corp.	corporation submits this statement for the purpos oration's board of directors. I hereby accept the	арроп п. с	n, aa rogiotoroa	
•	· · · · · · · · ·								
SIGNATURE	Signature, typed or printed name of registered agi	ent and title if appricable (NC	TE: Registered	Agent t	signature i	required when reinstating) DA	TE		
12,	OFFICERS AN	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS	AND DIRE	CTORS IN 12	
TITLE	D	DELETE	1.1 TIT	LE.		D/V	☐ Ch	ange	
NAME	CLOSE, THOMAS L		1.2 NA	MF		CLOSE, Thomas L.			
	1306 S.E. 8TH AVE.			reet ad	DDEEC	1306 S.E. 8th Ave.			
STREET ADDRESS	OKEECHOBEE FL 34972		1		Dhilos	Over tel - Fi 11003			
CITY-ST-ZIP		DELETE.		IY-ST-Z		Okeechobee, FL 34972	□ Ch	nange Addition	
TITLE	<u> </u>		2111			D/P , ,		ange Addition	
NAME	OHLAND, WESLEY J		2 2 NA	2 2 NAME		OHLAND, Wesley J.			
STREET ADDRESS			2.3 ST	2.3 STREET ADDRESS 💪		2100 Durham Ct.			
CITY-ST-ZIP	MT. DORA FL 32757		2 4 Ci	2 4 CiTY-ST-ZIP		Mt. Dora FL 32757 "			
TITLE		DELETE	3 1 TiT	ILE			☐ Ch	nange	
NAME			3 2 NA	ME	- 1				
l			1	REET AD	mpree				
STREET ADDRESS									
CITY-ST-ZIP		L DELETE	_	TY-\$1-	ZIP		☐ Cr	nange Addition	
TITLE		☐ DELETE	4.1 TIT		- 1			winds T vontroil	
NAME			4.2 N	AME	- 1				
STREET ADDRESS			4.3 ST	REET AD	DRESS				
CITY-ST-ZIP			4.4 CI	IY-ST-	ZiP				
TITLE		DELETE	5.1 TIT	ſLE			Cr	nange 🔲 Addition	
NAME			5.2 NA	ME					
1					ODDECC				
STREET ADDRESS				REET AD	- 1				
CITY-ST-ZIP		DELETE	_	TY-ST-7	<u> </u>		170	nange Addition	
TITLE		☐ DELETE	6.1 TIT	ILE			L Ct	range L Augullun	
NAME			6.2 NA	ME					
STREET ADDRESS			6.3 ST	REET AD	ODRESS				
CITY-ST-ZIP			6.4 CI	TY-51-7	ZIP				
3011-01-EII	- All (1) - A 15 - 1 - 5 1 1 1 1	Tall Alice A No de A A No.				d in Section 119 07/3)(i) Florida Statutos I furthe	or cortify th	at the information	

I. I 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.