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

PROFIT CORPORATION ANNUAL REPORT

1997

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 24 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S23691

(6)

ENERGY & REGULATORY CONSULTANTS INC.

						4:01
Principal Place of Business Mailing Address						
598 S W HIDT PALM CITY FI	DEN RIVER AVE L 34990	598 S W HIDDEN RIVER AVE PALM CITY FL 34990-1406				
6 D.::	N				3. Date Incorporated or Qualified 01/09/1991	3a. Date of Last Report 04/19/1996
2. Principal Place of Business .		2a, Mailing Address		4. FEI Number	Applied For	
Suite, Apt. #, etc.		26			65-0236981	Not Applicable
22 Suite, Apr	. #, OC.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State			Fee Required	
23		28		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip Country		Zip Country		This corporation has liability for intangible tax under s. 199.032,		
24	25 29		30			
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Reg	
ZAN	MBO, RICHARD A		6	1 Name		·
598 S W HIDDEN RIVER AVE				82 Street Address (P.O. Box Number is Not Acceptable)		
PALM CITY FL 34990				- 01.00(7.00	1000 (F.O. DOX Number is Not Acceptable	(6)
			8	3		
			B	4 City		85 Zip Code
				/		
11. Pursuant office or	to the provisions of Sections 607,050 registered agent, or both, in the State	2 and 607.1508, Florida Statut	es, the abo	ive-named cor	poration submits this statement for the pation's board of directors. I hereby accep	urpose of changing its registered
agent. I a	am familiar with, and accept the obliga	ations of Section 607.0505, Fig	orida Statut	es.	mon's board or directors. Thereby accept	t the appointment as registered
SIGNATURE						
12.	Signature, typod or printed name of registered age OFFICERS ANI		F: Registered /	gent signature requ	ired when reinstating)	DATE
TITLE	PST	DELETE	1.1 101(1		ADDITIONS/CHANGES TO OFFICE	Change Addition
NAME	ZAMBO, RICHARD A		1.2 NAM			Change Addition
STREET ADDRESS	598 S W HIDDEN RIVER AVE			ET ADDRESS		ļ
CITY-ST-ZIP	PALM CITY FL		1.4 CITY			
TITLE	D	DELETE	2.1 11111			Change Addition
NAME	ZAMBO, RICHARD A 22		2.2 NAM	<u>.</u>		<u> </u>
STREET ADDRESS	598 S W HIDDEN RIVER AVE		2.3 S1RE	ET ADDRESS		
CITY-ST-ZIP	PALM CITY FL		2.4 C(1)	- S1 - 21P		
TITLE		DELETE	3.1 TITLE			Change Addition
NAME			3.2 NAM			
STREET ADDRESS			3.3 STRE	ET ADDRESS		
CITY-ST-ZIP			3,4. CI1Y	- S1 - ZIP		
TITLE		☐ DELETE	4.1 TITLE			Change Addition
NAME			4. 2 NAM	E		
STREET ADDRESS			4 3 STRE	et address		
CITY-ST-ZIP			4.4 C(TY			
TITLE		☐ DELETE	5 1 TITLE			Change Addition
NAME			5.2 NAM			
STREET ADDRESS			1	E1 ADDRESS		
CITY-ST-ZIP		T priest	5.4 C(1)			
TITLE		☐ DELETE	6.1 711LE			Change Addition
name ,			G.2 NAM	.]		

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 logal effect as if made under oath; that tam 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 change it or an address

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP