2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V01581

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

BIRMINGHAM, AL 35202

BIRMINGHAM, AL 35202

LEE, JAMES C III

P O BOX 10048

(X) Delete

FILED Mar 18, 2009 Secretary of State

Entity Name: AVALON UTILITIES, INC. **Current Principal Place of Business: New Principal Place of Business:** 3220 AVALON BLVD. MILTON, FL 32583 US **Current Mailing Address: New Mailing Address:** 3220 AVALON BLVD. MILTON, FL 32583 US FEI Number: 59-3112660 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MILLER, JANE 3220 AVALON BLVD MILTON, FL 32583 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition Name: MILLER, JANE Name: MILLER, JANE 3220 AVALON BLVD 3220 AVALON BLVD Address: Address: City-St-Zip: MILTON, FL 32583 City-St-Zip: MILTON, FL 32583 Title: VSTD Title: () Delete (X) Change () Addition DUDLEY, STEWART R Name: DUDLEY, STEWART R Name: 2101 MAGNOLIA AVENUE, SOUTH, SUITE 300 2101 MAGNOLIA AVENUE, SOUTH, SUITE 300 Address: Address: BIRMINGHAM, AL 35205 City-St-Zip: City-St-Zip: BIRMINGHAM, AL 35205 () Delete Title: Title: DP (X) Change () Addition LEE, JAMES C III LEE, JAMES C III Name: Name: P.O. BOX 10048 N/A P.O. BOX 10048 Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

BIRMINGHAM, AL 35202

() Change () Addition

SIGNATURE: JAMES C LEE III DP 03/18/2009