

**2015 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P98000065504

**Entity Name:** CENTERLINE UTILITIES, INC.**Current Principal Place of Business:**2180 SW POMA DRIVE  
PALM CITY, FL 34990**Current Mailing Address:**2180 SW POMA DRIVE  
PALM CITY, FL 34990 US**FEI Number:** 65-0849488**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CHERRY, RICHARD G  
8409 N. MILITARY TRAIL  
SUITE 123  
PALM BEACH GARDENS, FL 33410 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**Officer/Director Detail :**

Title	PRESIDENT, DIRECTOR
Name	CHESNEY, FREDRICK H
Address	9763 SW SANTA MONICA DRIVE
City-State-Zip:	PALM CITY FL 34990

Title	TREASURER, DIRECTOR
Name	CHESNEY, MARGUERITE
Address	9763 SW SANTA MONICA DRIVE
City-State-Zip:	PALM CITY FL 34990

Title	VP
Name	CHESNEY, KATIE
Address	9763 SW SANTA MONICA DRIVE
City-State-Zip:	PALM CITY FL 34990

Title	SECRETARY
Name	PAYNE, NICOLE R
Address	3286 SE QUAY STREET
City-State-Zip:	PORT ST. LUCIE FL 34984

*I hereby 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 all other like empowered.*

**SIGNATURE:** FREDRICK H. CHESNEY

PRESIDENT

09/09/2015

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date