

ORIGINAL

LAW OFFICES  
ROSE, SUNDBSTROM & BENTLEY, LLP  
2548 BLAIRSTONE PINES DRIVE  
TALLAHASSEE, FLORIDA 32301

FREDERICK L. ASCHAUER, JR.  
CHRIS H. BENTLEY, P.A.  
ROBERT C. BRANNAN  
DAVID F. CHESTER  
F. MARSHALL DETERDING  
JOHN R. JENKINS, P.A.  
STEVEN T. MINDLIN, P.A.  
DAREN L. SHIPPY  
WILLIAM E. SUNDBSTROM, P.A.  
DIANE D. TREMOR, P.A.  
JOHN L. WHARTON  
ROBERT M. C. ROSE, OF COUNSEL  
WAYNE L. SCHIEFELBEIN, OF COUNSEL

(850) 877-6555  
FAX (850) 656-4029  
www.rsbattorneys.com

CENTRAL FLORIDA OFFICE  
600 S. NORTH LAKE BLVD., SUITE 160  
ALTAMONTE SPRINGS, FLORIDA 32701-6177  
(407) 830-6331  
FAX (407) 830-8522

REPLY TO ALTAMONTE SPRINGS

MARTIN S. FRIEDMAN, P.A.  
VALERIE L. LORD, OF COUNSEL  
(LICENSED IN TEXAS ONLY)

June 8, 2004

HAND DELIVERY

RECEIVED-FPSC  
JUN -8 PM 1:01  
COMMISSION  
CLERK

Ms. Blanca Bayo  
Commission Clerk and Administrative Services Director  
Florida Public Service Commission  
2540 Shumard Oak Boulevard  
Tallahassee, FL 32399

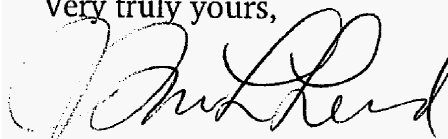
Re: Docket No.: 040359-WS; Application for Authority to Operate Under Fictitious Name  
By AquaSource Utility, Inc., Arredondo Utility Company, Inc., Crystal River Utilities,  
Inc., Jasmine Lakes Utilities, Inc., Lake Suzy Utility, Inc., and Ocala Oaks Utilities,  
Inc.  
Our File No.: 33087.01

Dear Ms. Bayo:

Enclosed for filing are the original and twelve (12) copies in the above-referenced  
docket of Late Filed Exhibit "B", and an amended Exhibit "C".

Please contact me, if you should have any questions.

Very truly yours,



VALERIE L. LORD  
For the Firm

CMP \_\_\_\_\_  
COM \_\_\_\_\_  
CTR \_\_\_\_\_  
ECR \_\_\_\_\_  
GCL      VLL/tlc  
OPC      Enclosures

MMS      cc: Ms. Pat Brady, Division of Economic Regulation (w/enclosures) (by facsimile)  
RCA      Kathy L. Pape, Esquire (w/o enclosures)  
SCR      Ms. Nance Guth (w/o enclosures)

SEC   /   M:\1 ALTAMONTE\AQUA AMERICA FLORIDA (33087)\(01) MISC - FL UTILITY MATTERS\PSC Clerk 03 (Ex B and C).ltr.wpd

OTH \_\_\_\_\_

DOCUMENT NUMBER-DATE  
06392 JUN-8 3  
FPSC-COMMISSION CLERK

**STATE OF FLORIDA  
BEFORE THE PUBLIC SERVICE COMMISSION**

In re: APPLICATION FOR AUTHORITY TO  
OPERATE UNDER FICTITIOUS  
NAME BY AQUASOURCE UTILITY, INC.  
ARREDONDO UTILITY COMPANY,  
INC., CRYSTAL RIVER UTILITIES, INC.,  
JASMINE LAKES UTILITIES, INC., LAKE  
SUZY UTILITY, INC., AND OCALA OAKS  
UTILITIES, INC.

---

Docket No. 040359-WS

**NOTICE OF FILING**

Applicant, AquaSource Utility, Inc. ("AquaSource Utility"), hereby notices filing in the above-referenced docket Fictitious Name Certificates which are late filed Exhibit "B", and Notice to Customers which is amended Exhibit "C", to its Application for Authority to Operate Under Fictitious Name.

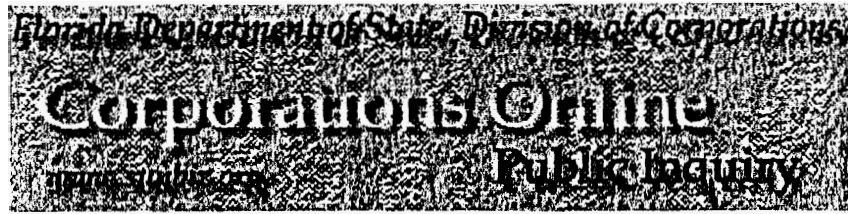
Respectfully submitted on this 8<sup>th</sup> day of  
June 2004, by:

ROSE, SUNDSTROM & BENTLEY, LLP  
600 S. North Lake Boulevard  
Suite 160  
Altamonte Springs, Florida 32701-6177  
(407) 830-6331  
(407) 830-8522 Fax

By: 

VALERIE L. LORD

**EXHIBIT "B"**



*Aquasource Utilities Inc.*

**AQUA UTILITIES FLORIDA, INC.**  
 6960 PROFESSIONAL PKWY E, STE 400  
 SARASOTA, FL 34240

<b>Document Number</b> G04058700072	<b>Status</b> ACTIVE	<b>Date Filed</b> 02/27/2004
<b>Expiration Date</b> 12/31/2009	<b>Current Owners</b> 000000001	<b>County</b> MULTIPLE
<b>Total Pages</b> 000000001	<b>Events Filed</b> 000000000	<b>FEI Number</b> 76-0556391

No Filing History

Owner Information

Name & Address	FEI Number	Charter Number
AQUASOURCE UTILITIES, INC. 6960 PROFESSIONAL PKWY E, STE 400 SARASOTA, FL 34240	76-0556391	F98000005384

Document Images

Listed below are the images available for this filing.



**THIS IS NOT OFFICIAL RECORD; SEE DOCUMENTS IF QUESTION OR CONFLICT**

# State of Florida



Department of State

I certify that the attached is a true and correct copy of the Application For Registration of Fictitious Name of AQUA UTILITIES FLORIDA, INC., registered with the Department of State on February 27, 2004, as shown by the records of this office.

The Registration Number of this Fictitious Name is G04058700072.



CR2EO22 (2-03)

Given under my hand and the  
Great Seal of the State of Florida  
at Tallahassee, the Capitol, this the  
Second day of March, 2004

*Glenda E. Hood*  
Glenda E. Hood  
Secretary of State

**FILED**  
**Feb 27, 2004 8:00 am**  
**Secretary of State**

02-27-2004 90257 022 -\*\*\*80 00  
G04058700072

**APPLICATION FOR REGISTRATION OF FICTITIOUS NAME**

Note: Acknowledgements/certificates will be sent to the address in Section 1 only.

Section 1

1. AQUA UTILITIES FLORIDA, INC.  
Fictitious Name to be Registered (see instructions if name includes "Corp" or "Inc")

6960 PROFESSIONAL PENNY E., SUITE 400  
Mailing Address of Business

SARASOTA FLORIDA 34240  
City State Zip Code

3. Florida County of principal place of business: \_\_\_\_\_  
MULTIPLE  
(see instructions if more than one county)

4. FEI Number: 76-0556391

This space for office use only

Section 2

**A. Owner(s) of Fictitious Name if Individual(s): (Use an attachment if necessary):**

1. Last First M.I. Address City State Zip Code

2. Last First M.I. Address City State Zip Code

**B. Owner(s) of Fictitious Name if other than an Individual: (Use attachment if necessary):**

1. AQUA UTILITIES, INC. 2. \_\_\_\_\_  
Entity Name Entity Name

6960 PROFESSIONAL PENNY E. SUITE 400 \_\_\_\_\_  
Address Address

SARASOTA FLORIDA 34240 \_\_\_\_\_  
City State Zip Code City State Zip Code

Florida Registration Number F98000005384 Florida Registration Number \_\_\_\_\_

FEI Number: 76-0556391 FEI Number: \_\_\_\_\_

Applied for  Not Applicable  Applied for  Not Applicable

Section 3

I (we) the undersigned, being the sole (all the) party(ies) owning interest in the above fictitious name, certify that the information indicated on this form is true and accurate, in accordance with Section 865.09, F.S. I (we) understand that the signature(s) below shall have the same legal effect as if made under oath. (At Least One Signature Required)

Richard D. Hines APRS. 2/23/04  
Signature of Owner Date

Phone Number: (813) 645-4271 A. SHAWING Phone Number: \_\_\_\_\_

CR4E001B (1/02)

Section 4

**FOR CANCELLATION COMPLETE SECTION 4 ONLY:**  
**FOR FICTITIOUS NAME OR OWNERSHIP CHANGE COMPLETE SECTIONS 1 THROUGH 4:**

I (we) the undersigned, hereby cancel the fictitious name \_\_\_\_\_  
\_\_\_\_\_, which was registered on \_\_\_\_\_ and was assigned  
registration number \_\_\_\_\_

Signature of Owner Date Signature of Owner Date

Mark the applicable boxes  Certificate of Status — \$10  Certified Copy — \$30  
FILING FEE: \$50



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

March 2, 2004

MAR 6 2004

**AQUA UTILITIES FLORIDA, INC.  
6960 PROFESSIONAL PKWY E, STE 400  
SARASOTA, FL 34240**

**Subject: AQUA UTILITIES FLORIDA, INC. REGISTRATION NUMBER:  
G04058700072**

This will acknowledge the filing of the above fictitious name registration which was registered on February 27, 2004. This registration gives no rights to ownership of the name.

Each fictitious name registration must be renewed every five years between January 1 and December 31 of the expiration year to maintain registration. Three months prior to the expiration date a statement of renewal will be mailed.

**IT IS THE RESPONSIBILITY OF THE BUSINESS TO NOTIFY THIS OFFICE IN WRITING IF THEIR MAILING ADDRESS CHANGES.**  
Whenever corresponding please provide assigned Registration Number.

Enclosed is your certificate(s) as requested.

Should you have any questions regarding this matter you may contact our office at 850-245-6058.

Division of Corporations



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

MAR 05 2004

*Arredondo*

March 2, 2004

AQUA UTILITIES FLORIDA, INC  
6960 PROFESSIONAL PKWY E STE 400  
SARASOTA, FL 34240

Subject: **AQUA UTILITIES FLORIDA, INC REGISTRATION NUMBER:  
G04058700074**

This will acknowledge the filing of the above fictitious name registration which was registered on February 27, 2004. This registration gives no rights to ownership of the name.

Each fictitious name registration must be renewed every five years between January 1 and December 31 of the expiration year to maintain registration. Three months prior to the expiration date a statement of renewal will be mailed.

**IT IS THE RESPONSIBILITY OF THE BUSINESS TO NOTIFY THIS OFFICE IN WRITING IF THEIR MAILING ADDRESS CHANGES.**

Whenever corresponding please provide assigned Registration Number.

Enclosed is your certificate(s) as requested.

Should you have any questions regarding this matter you may contact our office at 850-245-6058.

Division of Corporations

Division of Corporations - P.O. BOX 1300 - Tallahassee, Florida 32302



# State of Florida



Department of State

I certify that the attached is a true and correct copy of the Application For Registration of Fictitious Name of AQUA UTILITIES FLORIDA, INC, registered with the Department of State on February 27, 2004, as shown by the records of this office.

The Registration Number of this Fictitious Name is G04058700074.



CR2EO22 (2-03)

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capitol, this the Second day of March, 2004

*Glenda E. Hood*

Glenda E. Hood  
Secretary of State

FILED  
Feb 27, 2004 8:00 am  
Secretary of State

02-27-2004 90257 023 \*\*\*\*\*80.00  
G04058700074

APPLICATION FOR REGISTRATION OF FICTITIOUS NAME

Note: Acknowledgements/certificates will be sent to the address in Section 1 only.

Section 1

1. AQUA UTILITIES FLORIDA, INC.  
Fictitious Name to be Registered (see instructions if name includes "Corp" or "Inc")

6960 PROFESSIONAL PKWY E. SUITE 400  
Mailing Address of Business  
SARASOTA FLORIDA 34240  
City State Zip Code

3. Florida County of principal place of business: \_\_\_\_\_  
ALACHUA  
(see instructions if more than one county)

4. FEI Number: 76-0556391

This space for office use only

Section 2

A. Owner(s) of Fictitious Name if Individual(s): (Use an attachment if necessary):

1. Last First M.I. \_\_\_\_\_  
Address \_\_\_\_\_  
City State Zip Code \_\_\_\_\_

2. Last First M.I. \_\_\_\_\_  
Address \_\_\_\_\_  
City State Zip Code \_\_\_\_\_

B. Owner(s) of Fictitious Name if other than an individual: (Use attachment if necessary):

1. ARREDONDO UTILITY CO, INC.  
Entity Name  
6960 PROFESSIONAL PKWY E. SUITE 400  
Address  
SARASOTA FLORIDA 34240  
City State Zip Code  
Florida Registration Number F27826  
FEI Number: 76-0556391  
 Applied for  Not Applicable

2. \_\_\_\_\_  
Entity Name  
Address \_\_\_\_\_  
City State Zip Code \_\_\_\_\_  
Florida Registration Number \_\_\_\_\_  
FEI Number: \_\_\_\_\_  
 Applied for  Not Applicable

Section 3

I (we) the undersigned, being the sole (all the) party(ies) owning interest in the above fictitious name, certify that the information indicated on this form is true and accurate in accordance with Section 885.09, F.S., I (we) understand that the signature(s) below shall have the same legal effect as if made under oath. (At Least One Signature Required)

Richard D. Lyons Pres. 2/23/04  
Signature of Owner Date  
Phone Number: (610) 645-4271 ATTN: M. SHIRING

\_\_\_\_\_  
Signature of Owner Date  
Phone Number: \_\_\_\_\_

CR14001B (1/02)

Section 4

FOR CANCELLATION COMPLETE SECTION 4 ONLY:  
FOR FICTITIOUS NAME OR OWNERSHIP CHANGE COMPLETE SECTIONS 1 THROUGH 4:

I (we) the undersigned, hereby cancel the fictitious name \_\_\_\_\_  
\_\_\_\_\_, which was registered on \_\_\_\_\_ and was assigned  
registration number \_\_\_\_\_

\_\_\_\_\_  
Signature of Owner Date

\_\_\_\_\_  
Signature of Owner Date

Mark the applicable boxes  Certificate of Status — \$10  Certified Copy — \$30

FILING FEE: \$50



*Crystal River*

**AQUA UTILITIES FLORIDA, INC**  
 6960 PROFESSIONAL PKWY E , STE 400  
 SARASOTA, FL 34240

<b>Document Number</b> G04058700081	<b>Status</b> ACTIVE	<b>Date Filed</b> 02/27/2004
<b>Expiration Date</b> 12/31/2009	<b>Current Owners</b> 000000001	<b>County</b> MULTIPLE
<b>Total Pages</b> 000000001	<b>Events Filed</b> 000000000	<b>FEI Number</b> 76-0556391

No Filing History

Previous on List

Return to Name List

Next on List

Owner Information

Name & Address	FEI Number	Charter Number
CRYSTAL RIVER UTILITIES, INC 6960 PROFESSIONAL PKWY E, STE 400 SARASOTA, FL 34240	76-0556391	P95000065888

Document Images

Listed below are the images available for this filing.

G04058700081 -- 02/27/2004 -- REGISTRATION

THIS IS NOT OFFICIAL RECORD; SEE DOCUMENTS IF QUESTION OR CONFLICT

Fictitious Name Inquiry

Fictitious Name Help



Department of State

I certify that the attached is a true and correct copy of the Application For Registration of Fictitious Name of AQUA UTILITIES FLORIDA, INC, registered with the Department of State on February 27, 2004, as shown by the records of this office.

The Registration Number of this Fictitious Name is G04058700081.



CR2EO22 (2-03)

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capitol, this the Second day of March, 2004

*Glenda E. Hood*

Glenda E. Hood  
Secretary of State



FLORIDA DEPARTMENT OF STATE  
**Glenda E. Hood**  
Secretary of State

MAR 05 2004

March 2, 2004

**AQUA UTILITIES FLORIDA, INC**  
6960 PROFESSIONAL PKWY E, STE 400  
SARASOTA, FL 34240

**Subject: AQUA UTILITIES FLORIDA, INC REGISTRATION NUMBER:  
G04058700081**

This will acknowledge the filing of the above fictitious name registration which was registered on February 27, 2004. This registration gives no rights to ownership of the name.

Each fictitious name registration must be renewed every five years between January 1 and December 31 of the expiration year to maintain registration. Three months prior to the expiration date a statement of renewal will be mailed.

**IT IS THE RESPONSIBILITY OF THE BUSINESS TO NOTIFY THIS OFFICE IN WRITING IF THEIR MAILING ADDRESS CHANGES.**  
Whenever corresponding please provide assigned Registration Number.

Enclosed is your certificate(s) as requested.

Should you have any questions regarding this matter you may contact our office at 850-245-6058.

Division of Corporations

APPLICATION FOR REGISTRATION OF FICTITIOUS NAME

Note: Acknowledgements/certificates will be sent to the address in Section 1 only.

FILED  
Feb 27, 2004 8:00 am  
Secretary of State

02-27-2004 90257 029 \*\*\*\*\*80 00  
G04058700081

Section 1

1. AQUA UTILITIES FLORIDA, INC.  
Fictitious Name to be Registered (see instructions if name includes "Corp" or "Inc")

6960 PROFESSIONAL PKWY E., SUITE 400  
Mailing Address of Business

SARASOTA FLORIDA 34240  
City State Zip Code

3. Florida County of principal place of business: \_\_\_\_\_  
MULTIPLE  
(see instructions if more than one county)

4 FEI Number: 76-0556391

This space for office use only

Section 2

A. Owner(s) of Fictitious Name If Individual(s): (Use an attachment if necessary):

1.	LAST	FIRST	M.I.	2.	LAST	FIRST	M.I.
	Address			Address			
	City State Zip Code			City State Zip Code			

B. Owner(s) of Fictitious Name If other than an Individual: (Use attachment if necessary):

1.	Entity Name	2.	Entity Name
	<u>CRYSTAL RIVER UTILITIES, INC.</u>		
	<u>6960 PROFESSIONAL PKWY E., SUITE 400</u>		
	<u>SARASOTA FLORIDA 34240</u>		
	City State Zip Code		City State Zip Code
	Florida Registration Number <u>P95000065888</u>		Florida Registration Number _____
	FEI Number: <u>76-0556391</u>		FEI Number: _____
	<input type="checkbox"/> Applied for <input type="checkbox"/> Not Applicable		<input type="checkbox"/> Applied for <input type="checkbox"/> Not Applicable

Section 3

I (we) the undersigned, being the sole (all the) party(ies) owning interest in the above fictitious name, certify that the information indicated on this form is true and accurate in accordance with Section 865.09, F.S. I (we) understand that the signature(s) below shall have the same legal effect as if made under oath. (At least One Signature Required)

Richard Olague PREL. 2/23/04  
Signature of Owner Date

Phone Number: (610) 645 4291 ATTN: M. SHIRING

CR14E018 1/1021

Section 4

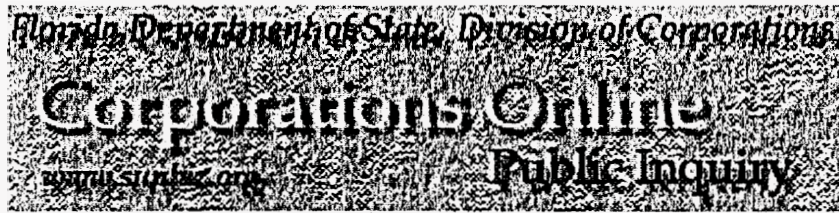
FOR CANCELLATION COMPLETE SECTION 4 ONLY:  
FOR FICTITIOUS NAME OR OWNERSHIP CHANGE COMPLETE SECTIONS 1 THROUGH 4:

I (we) the undersigned, hereby cancel the fictitious name \_\_\_\_\_  
\_\_\_\_\_, which was registered on \_\_\_\_\_ and was assigned  
registration number \_\_\_\_\_

\_\_\_\_\_  
Signature of Owner Date

\_\_\_\_\_  
Signature of Owner Date

Mark the applicable boxes  Certificate of Status — \$10  Certified Copy — \$30  
FILING FEE: \$50



**AQUA UTILITIES FLORIDA, INC.**  
 6960 PROFESSIONAL PKWY E, STE 400  
 SARASOTA, FL 34240

<b>Document Number</b> G04058700078	<b>Status</b> ACTIVE	<b>Date Filed</b> 02/27/2004
<b>Expiration Date</b> 12/31/2009	<b>Current Owners</b> 000000001	<b>County</b> PASCO
<b>Total Pages</b> 000000001	<b>Events Filed</b> 000000000	<b>FEI Number</b> 76-0556391

No Filing History

[Previous on List](#)

[Return to Name List](#)

[Next on List](#)

Owner Information

Name & Address	FEI Number	Charter Number
JASMINE LAKES UTILITIES CORP. 6960 PROFESSIONAL PKWY E, STE 400 SARASOTA, FL 34240	76-0556391	L60039

Document Images

Listed below are the images available for this filing.

G04058700078 -- 02/27/2004 -- REGISTRATION
--

**THIS IS NOT OFFICIAL RECORD; SEE DOCUMENTS IF QUESTION OR CONFLICT**

[Fictitious Name Inquiry](#)

[Fictitious Name Help](#)



FLORIDA DEPARTMENT OF STATE  
**Glenda E. Hood**  
Secretary of State

*James Hood*  
*Hood*

March 2, 2004

AQUA UTILITIES FLORIDA, INC.  
6960 PROFESSIONAL PKWY E, STE 400  
SARASOTA, FL 34240

MAR 05 2004

**Subject: AQUA UTILITIES FLORIDA, INC. REGISTRATION NUMBER:  
G04058700078**

This will acknowledge the filing of the above fictitious name registration which was registered on February 27, 2004. This registration gives no rights to ownership of the name.

Each fictitious name registration must be renewed every five years between January 1 and December 31 of the expiration year to maintain registration. Three months prior to the expiration date a statement of renewal will be mailed.

**IT IS THE RESPONSIBILITY OF THE BUSINESS TO NOTIFY THIS OFFICE IN WRITING IF THEIR MAILING ADDRESS CHANGES.**  
Whenever corresponding please provide assigned Registration Number.

Enclosed is your certificate(s) as requested.


Should you have any questions regarding this matter you may contact our office at 850-245-6058.

Division of Corporations

Division of Corporations - P.O. BOX 1300 - Tallahassee, Florida 32302



# State of Florida



Department of State

I certify that the attached is a true and correct copy of the Application For Registration of Fictitious Name of AQUA UTILITIES FLORIDA, INC., registered with the Department of State on February 27, 2004, as shown by the records of this office.

The Registration Number of this Fictitious Name is G04058700078.



CR2EO22 (2-03)

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capitol, this the Second day of March, 2004

*Glenda E. Hood*

Glenda E. Hood  
Secretary of State

### APPLICATION FOR REGISTRATION OF FICTITIOUS NAME

Note: Acknowledgements/certificates will be sent to the address in Section 1 only.

**FILED**  
**Feb 27, 2004 8:00 am**  
**Secretary of State**

02-27-2004 90257 028 \*\*\*\*\*80,00  
G04058700078

Section 1

1. AQUA UTILITIES FLORIDA, INC.  
Fictitious Name to be Registered (see instructions if name includes "Corp" or "Inc")

---

6960 PROFESSIONAL PKWY E., SUITE 400  
Mailing Address of Business

SARASOTA FLORIDA 34240  
City State Zip Code

3. Florida County of principal place of business: PASCO  
(see instructions if more than one county)

4. FEI Number: 76-0556391

This space for office use only

Section 2

**A. Owner(s) of Fictitious Name If Individual(s): (Use an attachment if necessary):**

1. Last First MI. Address City State Zip Code

2. Last First MI. Address City State Zip Code

**B. Owner(s) of Fictitious Name If other than an individual: (Use attachment if necessary):**

1. JASMINE LAKES UTILITIES CORP.  
Entity Name  
6960 PROFESSIONAL PKWY E., SUITE 400  
Address  
SARASOTA FLORIDA 34240  
City State Zip Code  
Florida Registration Number 160039  
FEI Number: 76-0556391  
 Applied for  Not Applicable

2. Entity Name Address City State Zip Code Florida Registration Number FEI Number.  
 Applied for  Not Applicable

Section 3

I (we) the undersigned, being the sole (all the) party(ies) owning interest in the above fictitious name, certify that the information indicated on this form is true and accurate. In accordance with Section 865.09, F.S., I (we) understand that the signature(s) below shall have the same legal effect as if made under oath. (At Least One Signature Required)

Rubén Delgado Pres. 2/23/04  
Signature of Owner Date  
Phone Number: (610) 645-4271 M. SHIRING

Signature of Owner Date  
Phone Number: \_\_\_\_\_

CR4E0016 (1/02)

Section 4

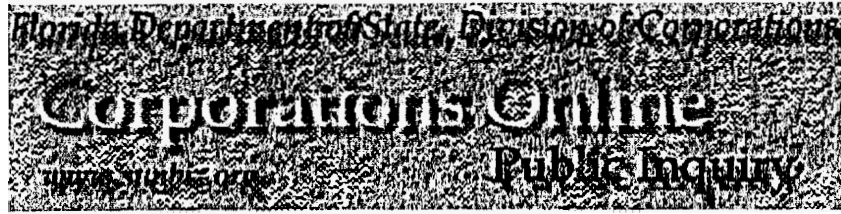
**FOR CANCELLATION COMPLETE SECTION 4 ONLY:  
FOR FICTITIOUS NAME OR OWNERSHIP CHANGE COMPLETE SECTIONS 1 THROUGH 4:**

I (we) the undersigned, hereby cancel the fictitious name \_\_\_\_\_  
\_\_\_\_\_ which was registered on \_\_\_\_\_ and was assigned  
registration number \_\_\_\_\_

Signature of Owner Date Signature of Owner Date

Mark the applicable boxes  Certificate of Status — \$10  Certified Copy — \$30

**FILING FEE: \$50**



**AQUA UTILITIES FLORIDA, INC.**  
 6960 PROFESSIONAL PKWY E, STE 400  
 SARASOTA, FL 34240

<b>Document Number</b> G04058700076	<b>Status</b> ACTIVE	<b>Date Filed</b> 02/27/2004
<b>Expiration Date</b> 12/31/2009	<b>Current Owners</b> 000000001	<b>County</b> DESOTO
<b>Total Pages</b> 000000001	<b>Events Filed</b> 000000000	<b>FEI Number</b> 76-0556391

**No Filing History**

[Previous on List](#)

[Return to Name List](#)

[Next on List](#)

**Owner Information**

Name & Address	FEI Number	Charter Number
LAKE SUZY UTILITY, INC. 6960 PROFESSIONAL PKWY E, SYE 400 SARASOTA, FL 34240	76-0556391	F53137

**Document Images**

Listed below are the images available for this filing.

[G04058700076 -- 02/27/2004 -- REGISTRATION](#)

**THIS IS NOT OFFICIAL RECORD; SEE DOCUMENTS IF QUESTION OR CONFLICT**

[Fictitious Name Inquiry](#)

[Fictitious Name Help](#)



*Linda Soggy*

**FLORIDA DEPARTMENT OF STATE**  
**Glenda E. Hood**  
Secretary of State

March 2, 2004

**AQUA UTILITIES FLORIDA, INC.**  
6960 PROFESSIONAL PKWY E, STE 400  
SARASOTA, FL 34240

MAR 9 5 2004

**Subject: AQUA UTILITIES FLORIDA, INC. REGISTRATION NUMBER:  
G04058700076**

This will acknowledge the filing of the above fictitious name registration which was registered on February 27, 2004. This registration gives no rights to ownership of the name.

Each fictitious name registration must be renewed every five years between January 1 and December 31 of the expiration year to maintain registration. Three months prior to the expiration date a statement of renewal will be mailed.

**IT IS THE RESPONSIBILITY OF THE BUSINESS TO NOTIFY THIS OFFICE IN WRITING IF THEIR MAILING ADDRESS CHANGES.**  
Whenever corresponding please provide assigned Registration Number.

Enclosed is your certificate(s) as requested.

Should you have any questions regarding this matter you may contact our office at 850-245-6058.

Division of Corporations

Division of Corporations - P.O. BOX 1300 - Tallahassee, Florida 32302

# State of Florida



Department of State

I certify that the attached is a true and correct copy of the Application For Registration of Fictitious Name of AQUA UTILITIES FLORIDA, INC., registered with the Department of State on February 27, 2004, as shown by the records of this office.

The Registration Number of this Fictitious Name is G04058700076.



CR2EO22 (2-03)

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capitol, this the Second day of March, 2004

*Glenda E. Hood*

Glenda E. Hood  
Secretary of State

**FILED**  
**Feb 27, 2004 8:00 am**  
**Secretary of State**

02-27-2004 90257 027 \*\*\*\*80 00  
G04058700076

**APPLICATION FOR REGISTRATION OF FICTITIOUS NAME**

Note: Acknowledgements/certificates will be sent to the address in Section 1 only.

Section 1

1. AQUA UTILITIES FLORIDA, INC.  
Fictitious Name to be Registered (see instructions if name includes "Corp" or "Inc")

---

6960 PROFESSIONAL PKWY E., SUITE 400  
Mailing Address of Business

SARASOTA FLORIDA 34240  
City State Zip Code

3. Florida County of principal place of business: DESBORO  
(see instructions if more than one county)

4. FEI Number: 76-0556391

INDUJY

This space for office use only

Section 2

**A. Owner(s) of Fictitious Name If Individual(s): (Use an attachment if necessary):**

1. Last First MI Address City State Zip Code

2. Last First MI Address City State Zip Code

**B. Owner(s) of Fictitious Name If other than an individual: (Use attachment if necessary):**

1. LAKE SUZY UTILITY, INC.  
Entity Name  
6960 PROFESSIONAL PKWY E., SUITE 400  
Address  
SARASOTA FLORIDA 34240  
City State Zip Code  
Florida Registration Number F53137  
FEI Number: 76-0556391  
 Applied for  Not Applicable

2. Entity Name Address City State Zip Code Florida Registration Number FEI Number:  Applied for  Not Applicable

Section 3

I (we) the undersigned, being the sole (all the) party(ies) owning interest in the above fictitious name, certify that the information indicated on this form is true and accurate in accordance with Section 865.09, F.S. I (we) understand that the signature(s) below shall have the same legal effect as if made under oath. (At Least One Signature Required)

Richard D. Huguo PREP. 2/23/04  
Signature of Owner Date  
Phone Number: (610) 645 4271 ATTN: M. SHIRING

Signature of Owner Date Phone Number:

CRM E0015 (1/02)

Section 4

I (we) the undersigned, hereby cancel the fictitious name \_\_\_\_\_ which was registered on \_\_\_\_\_ and was assigned registration number \_\_\_\_\_

Signature of Owner Date Signature of Owner Date

Mark the applicable boxes  Certificate of Status — \$10  Certified Copy — \$30  
FILING FEE: \$50



**AQUA UTILITIES FLORIDA, INC**  
 6960 PROFESSIONAL PKWY E STE 400  
 SARASOTA, FL 34240

<b>Document Number</b> G04058700077	<b>Status</b> ACTIVE	<b>Date Filed</b> 02/27/2004
<b>Expiration Date</b> 12/31/2009	<b>Current Owners</b> 000000001	<b>County</b> MARION
<b>Total Pages</b> 000000001	<b>Events Filed</b> 000000000	<b>FEI Number</b> 76-0556391

**No Filing History**

[Previous on List](#)

[Return to Name List](#)

[Next on List](#)

**Owner Information**

Name & Address	FEI Number	Charter Number
OCALA OAKS UTILITIES, INC 6960 PROFESSIONAL PKWY E STE 400 SARASOTA, FL 34240	76-1556391	F66138

**Document Images**

Listed below are the images available for this filing.

G04058700077 -- 02/27/2004 -- REGISTRATION

**THIS IS NOT OFFICIAL RECORD; SEE DOCUMENTS IF QUESTION OR CONFLICT**

[Fictitious Name Inquiry](#)

[Fictitious Name Help](#)



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

*Carrie  
Hicks*

MAR 5 2004

March 2, 2004

AQUA UTILITIES FLORIDA, INC  
6960 PROFESSIONAL PKWY E STE 400  
SARASOTA, FL 34240

Subject: **AQUA UTILITIES FLORIDA, INC REGISTRATION NUMBER:  
G04058700077**

This will acknowledge the filing of the above fictitious name registration which was registered on February 27, 2004. This registration gives no rights to ownership of the name.

Each fictitious name registration must be renewed every five years between January 1 and December 31 of the expiration year to maintain registration. Three months prior to the expiration date a statement of renewal will be mailed.

**IT IS THE RESPONSIBILITY OF THE BUSINESS TO NOTIFY THIS OFFICE IN WRITING IF THEIR MAILING ADDRESS CHANGES.**  
Whenever corresponding please provide assigned Registration Number.

Enclosed is your certificate(s) as requested.

Should you have any questions regarding this matter you may contact our office at 850-245-6058.

Division of Corporations

Division of Corporations - P.O. BOX 1300 - Tallahassee, Florida 32302



# State of Florida



## Department of State

I certify that the attached is a true and correct copy of the Application For Registration of Fictitious Name of AQUA UTILITIES FLORIDA, INC, registered with the Department of State on February 27, 2004, as shown by the records of this office.

The Registration Number of this Fictitious Name is G04058700077.



CR2EO22 (2-03)

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capitol, this the Second day of March, 2004

*Glenda E. Hood*

Glenda E. Hood  
Secretary of State

### APPLICATION FOR REGISTRATION OF FICTITIOUS NAME

Note: Acknowledgements/certificates will be sent to the address in Section 1 only.

**FILED**  
**Feb 27, 2004 8:00 am**  
**Secretary of State**

02-27-2004 90257 026 \*\*\*\*80 00  
G04058700077

Section 1

1. AQUA UTILITIES FLORIDA, INC.  
Fictitious Name to be Registered (see instructions if name includes "Corp" or "Inc")

6960 PROFESSIONAL PKWY E., SUITE 400  
Mailing Address of Business  
SARASOTA FLORIDA 34240  
City State Zip Code

3. Florida County of principal place of business: MARION  
(see instructions if more than one county)

4. FEI Number: 76-0556391

760000

This space for office use only

Section 2

#### A. Owner(s) of Fictitious Name if Individual(s): (Use an attachment if necessary):

1. Last First MI  
Address  
City State Zip Code

2. Last First MI  
Address  
City State Zip Code

#### B. Owner(s) of Fictitious Name if other than an individual: (Use attachment if necessary):

1. OCEALA OAKS UTILITIES, INC.  
Entity Name  
6960 PROFESSIONAL PKWY E., SUITE 400  
Address  
SARASOTA FLORIDA 34240  
City State Zip Code  
Florida Registration Number F66138  
FEI Number: 76-0556391  
 Applied for  Not Applicable

2. Entity Name  
Address  
City State Zip Code  
Florida Registration Number  
FEI Number:  
 Applied for  Not Applicable

Section 3

I (we) the undersigned, being the sole (all the) party(ies) owning interest in the above fictitious name, certify that the information indicated on this form is true and accurate. In accordance with Section 865.09, F.S., I (we) understand that the signature(s) below shall have the same legal effect as if made under oath. (At Least One Signature Required)

Richard D. Hugo PRC 2/23/04  
Signature of Owner Date

Signature of Owner Date

Phone Number: (610) 645 4291 ATTN: M. SHIRING

Phone Number:

CR1E0016 (1/02)

Section 4

FOR CANCELLATION COMPLETE SECTION 4 ONLY:  
FOR FICTITIOUS NAME OR OWNERSHIP CHANGE COMPLETE SECTIONS 1 THROUGH 4:

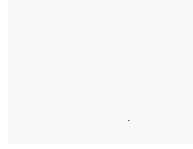
I (we) the undersigned, hereby cancel the fictitious name \_\_\_\_\_  
\_\_\_\_\_, which was registered on \_\_\_\_\_ and was assigned  
registration number \_\_\_\_\_

Signature of Owner Date

Signature of Owner Date

Mark the applicable boxes  Certificate of Status — \$10  Certified Copy — \$30  
FILING FEE: \$50

**EXHIBIT "C"**



**NOTICE OF APPLICATION FOR CHANGE OF NAME  
AND FOR AUTHORITY TO OPERATE UNDER FICTITIOUS NAME**

**LEGAL NOTICE**

Notice is hereby given, pursuant to Section 367.071, Florida Statutes, of the application by AquaSource Utility, Inc., and the other utilities listed below for authority to operate under the fictitious name, Aqua Utilities Florida, Inc. The utilities request this name change to identify the utilities as subsidiaries of, and associate their names with, Aqua Utilities Florida, Inc., and their parent company, Aqua America, Inc. (formerly known as Philadelphia Suburban Corporation). The name change will not affect the way you currently communicate and do business with the utilities. For instance, the telephone number you call for routine customer service and emergencies will remain the same - (800) 250-7532. The same local employees will continue to provide you with quality service.

On \_\_\_\_\_, 2004, the Public Service Commission approved the application. Effective immediately, please make all payments to Aqua Utilities Florida, Inc.

**THIS APPLICATION IS NOT A REQUEST TO CHANGE THE RATES OF AQUASOURCE UTILITY, INC., OR ANY OF THE UTILITIES LISTED BELOW.**

The following are the utilities which are certificated by the Florida Public Service Commission, which are affected by this proceeding, and their counties of operation:

- Aqua Utilities Florida, Inc. . . . .Highlands, Lake, Lee, Polk
- Arredondo Utility Company, Inc. . . . . Alachua
- Crystal River Utilities, Inc. . . . . Lake, Palm Beach, Polk, Sumter
- Jasmine Lakes Utilities Corporation . . . . . Pasco
- Lake Suzy Utilities, Inc. . . . . DeSoto, Charlotte
- Ocala Oaks Utilities, Inc. . . . . Marion

If you have any questions, please contact your local utility office at 6960 Professional Parkway East, Suite 400, Sarasota, Florida 34240, or by calling (941) 907-7400.