


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 31, 2005 8:00 am**  
**Secretary of State**

03-31-2005 90044 010 \*\*\*150.00

**DOCUMENT # 186998**  
 1. Entity Name  
**KENSINGTON PARK UTILITIES, INC.**



Principal Place of Business  
**411 SEVENTH AVENUE, 14 FLR  
 PITTSBURGH, PA 15219**

Mailing Address  
**411 SEVENTH AVENUE, 14 FLR  
 PITTSBURGH, PA 15219**

2. Principal Place of Business  
**762 W. Lancaster Ave.**

3. Mailing Address  
**762 W. Lancaster Ave.**

Suite, Apt. #, etc.



03092005 Chg-P CR2E034 (10/03)

City & State  
**Bryn Mawr PA**

City & State  
**Bryn Mawr, PA**

Zip  
**19010**

Country  
**USA**

4. FEI Number  
**59-0833110**

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM  
 1200 S. PINE ISLAND ROAD  
 PLANTATION, FL 33324**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HOFFMANN, FRANK A 411 SEVENTH AVENUE, 14 FLR PITTSBURGH, PA 15219 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCFO VILLIOTTI, ANTHONY J 411 SEVENTH AVENUE, 14 FLR PITTSBURGH, PA 15219 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C HILES, BRYAN K 411 SEVENTH AVENUE, 14 FLR PITTSBURGH, PA 15219 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS STANEK, MARTIN J 411 SEVENTH AVENUE, 14 FLR PITTSBURGH, PA 15219 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP BEYER, DAVID J 11100 BRITTMOORE PARK DRIVE HOUSTON, TX 77041 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LABRECQUE, GLENN P 6960 PROFESSIONAL PARKWAY EAST, STE. 400 SARASOTA, FL 34240 <input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director and Chairman Nicholas De Benedictis 762 W. Lancaster Ave. Bryn Mawr, PA 19010 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Richard D. Hugus 762 W. Lancaster Ave. Bryn Mawr, PA 19010 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President-Operations Glenn P. LaBrecque 6960 Professional Pkwy. E., Ste. 400 Sarasota, FL 34240 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President and Secretary Roy H. Stahl 762 W. Lancaster Ave. Bryn Mawr, PA 19010 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President and Treasurer Kathy L. Pape 762 W. Lancaster Avenue Bryn Mawr, PA 19010 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Controller James Chukinas 762 W. Lancaster Ave. Bryn Mawr, PA 19010 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** Roy H. Stahl **3/31/05** **610-527-8000**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #