FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **261952** **(6)**

1. Corporation Name

ATLANTIC GAS CORPORATION

Principal Place of Business

101 NW 202ND TERR
PO BOX 69-J
MIAMI FL 33169

Mailing Address

101 NW 202ND TERR
PO BOX 69-J
MIAMI FL 33169

3. Date Incorporated or Qualified: **08/21/1962**

3a. Date of Last Report: **02/03/1995**

2. Principal Place of Business

21
22 Suite, Apt. #, etc.
23 City & State
24 Zip 25 Country

2a. Mailing Address

26
27 Suite, Apt. #, etc.
28 City & State
29 Zip 30 Country

4. FEI Number: **59-0997270** ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

MARTIN, J. PETER
101 N.W. 202ND TERR
MIAMI FL 33169

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE	PD	11 TITLE	☐ Change ☐ Addition
12 NAME	MARTIN,. J PETER	12 NAME	
13 STREET ADDRESS	101 N W 202 TERR	13 STREET ADDRESS	
14 CITY-ST-ZIP	MIAMI, FL 00000	14 CITY-ST-ZIP	
21 TITLE	STD ☒ DELETE	21 TITLE	STD ☒ Change ☐ Addition
22 NAME	MASTERS, MARCILIE S	22 NAME	Lou J. Defrain
23 STREET ADDRESS	101 NW 202ND TERR	23 STREET ADDRESS	101 NW 202nd Terr.
24 CITY-ST-ZIP	MIAMI, FL 00000	24 CITY-ST-ZIP	Miami, FL 33169
31 TITLE	V ☐ DELETE	31 TITLE	☐ Change ☐ Addition
32 NAME	MCLELLAND, JOHN W.	32 NAME	
33 STREET ADDRESS	303 JULIA ST	33 STREET ADDRESS	
34 CITY-ST-ZIP	NEW SMYRNA BCH, FL 00000	34 CITY-ST-ZIP	
41 TITLE	AT ☐ DELETE	41 TITLE	☐ Change ☐ Addition
42 NAME	LEVANDOSKI, JOAN A.	42 NAME	
43 STREET ADDRESS	101 N W 202 TERR	43 STREET ADDRESS	
44 CITY-ST-ZIP	MIAMI FL	44 CITY-ST-ZIP	
51 TITLE	AS ☐ DELETE	51 TITLE	☐ Change ☐ Addition
52 NAME	KOPANKE, BETTY C.	52 NAME	
53 STREET ADDRESS	101 N W 202 TERR	53 STREET ADDRESS	
54 CITY-ST-ZIP	MIAMI FL	54 CITY-ST-ZIP	
61 TITLE	VD ☐ DELETE	61 TITLE	☐ Change ☐ Addition
62 NAME	KAHL, E.J.	62 NAME	
63 STREET ADDRESS	101 N.W. 202ND TERR.	63 STREET ADDRESS	
64 CITY-ST-ZIP	MIAMI FL	64 CITY-ST-ZIP	

CR2E034 (12/95)

14. I hereby certify that the information supplied with this filing is voluntarily furnished and 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 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 12 or Block 13 if changed or added by an attachment with an address.

SIGNATURE: Peter Martin January 22, 1996 (305) 652-1100

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

J. Peter Martin, President