

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

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Mar 19 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 508007 (2)
1. Corporation Name
PIPELINE UTILITIES INCORPORATED

Principal Place of Business GARDEN INDUSTRIAL PARK 3610 FISCAL CT RIVIERA BCH. FL 33404-1754	Mailing Address GARDEN INDUSTRIAL PARK 3610 FISCAL CT RIVIERA BCH. FL 33404-1754
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 07/28/1976	
25		30		4. FEI Number 59-1684417	
25		30		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
25		30		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
25		30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent CRADDOCK, RUTH ANN 6820 140TH LN PALM BCH GDNS FL 33418		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code	
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11. Pursuant to the provisions of Sections 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

Signature typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	Chairman of Board/D
NAME	CRADDOCK, RUTH ANN	1.2 NAME	CRADDOCK, RUTH ANN
STREET ADDRESS	6820 140TH LN	1.3 STREET ADDRESS	6820 140th LANE
CITY-ST-ZIP	PALM BCH GDNS FL	1.4 CITY-ST-ZIP	PALM BEACH GARDENS, FL. 33418-7245
TITLE	VDC	2.1 TITLE	Co-Chairman of Board/D
NAME	CRADDOCK, JIM K.	2.2 NAME	JIM K. CRADDOCK
STREET ADDRESS	6820 140TH AVE	2.3 STREET ADDRESS	6820 140th LANE
CITY-ST-ZIP	PALM BCH GDNS FL	2.4 CITY-ST-ZIP	PALM BEACH GARDENS, FL. 33418-7245
TITLE	S	3.1 TITLE	
NAME	YOUNG, JOYCE E	3.2 NAME	
STREET ADDRESS	4396 BIRDWOOD STREET	3.3 STREET ADDRESS	
CITY-ST-ZIP	PALM BEACH GARDENS FL	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	P/D/S/GC
NAME		4.2 NAME	CRADDOCK, JAMES DAVID
STREET ADDRESS		4.3 STREET ADDRESS	6914 141st LANE
CITY-ST-ZIP		4.4 CITY-ST-ZIP	PALM BEACH GARDENS, FL. 33418-7245
TITLE		5.1 TITLE	V/D
NAME		5.2 NAME	TYO, RANDY S.
STREET ADDRESS		5.3 STREET ADDRESS	1073 SPRUCE RIDGE DRIVE
CITY-ST-ZIP		5.4 CITY-ST-ZIP	STUART, FL. 34994
TITLE		6.1 TITLE	T/D
NAME		6.2 NAME	BAKER, CATHERINE ANN
STREET ADDRESS		6.3 STREET ADDRESS	18364 FLAGSHIP CIRCLE
CITY-ST-ZIP		6.4 CITY-ST-ZIP	JUPITER, FL. 33458

14. 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 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 on an attachment with an address.

SIGNATURE:


SIGNATURE TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/10/98 (501) 842-8833

CR2E034 (10/97)