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1997 FEB 19 PM 3: 51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997

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

DOCUMENT # **F93000003753 (1)**
1. Corporation Name
FORCENERGY INC.



Principal Place of Business: **2730 S.W. THIRD AVENUE, SUITE 800 MIAMI FL 33129**
Mailing Address: **2730 S.W. THIRD AVENUE, SUITE 800 MIAMI FL 33129-2356**

3. Date Incorporated or Qualified: **08/18/1993**
3a. Date of Last Report: **02/07/1996**

2. Principal Place of Business: 21, 22, 23, 24
2a. Mailing Address: 26, 27, 28, 29, 30

4. FEI Number: **65-0429338**
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing: **\$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
WENNERSTROM, STIG
2730 S.W. THIRD AVENUE, SUITE 800
MIAMI FL 33129
SEE ENCLOSED

10. Name and Address of New Registered Agent
81. Name: **Corporation Services Co.**
82. Street Address (P.O. Box Number is Not Acceptable): **1201 Hays Street, Suite 105**
84. City: **Tallahassee, FL**
85. Zip Code: **32301**

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: PD	NAME: WENNERSTROM, STIG	1.1 TITLE:	1.2 NAME:
STREET ADDRESS: 2730 S.W. THIRD AVENUE, SUITE 800	CITY-ST-ZIP: MIAMI FL 33129	1.3 STREET ADDRESS:	1.4 CITY-ST-ZIP:
TITLE: VS	NAME: BRUSH, JOHN A	2.1 TITLE: VS	2.2 NAME: THOMAS F. GETTEN
STREET ADDRESS: 2730 S.W. THIRD AVENUE, SUITE 800	CITY-ST-ZIP: MIAMI FL 33129	2.3 STREET ADDRESS: 2730 JW 3RD AVENUE, SUITE 800	2.4 CITY-ST-ZIP: MIAMI, FLORIDA 33129
TITLE: VT	NAME: GRADY, E. JOSEPH	3.1 TITLE:	3.2 NAME:
STREET ADDRESS: 2730 S.W. THIRD AVENUE, SUITE 800	CITY-ST-ZIP: MIAMI FL 33129	3.3 STREET ADDRESS:	3.4 CITY-ST-ZIP:
TITLE: V	NAME: PORTER, JAMES RUSSEL	4.1 TITLE:	4.2 NAME:
STREET ADDRESS: 2730 S.W. THIRD AVENUE, SUITE 800	CITY-ST-ZIP: MIAMI FL 33129	4.3 STREET ADDRESS:	4.4 CITY-ST-ZIP:
TITLE: D	NAME: WENNERSTROM, STIG	5.1 TITLE:	5.2 NAME:
STREET ADDRESS: 2730 S.W. THIRD AVENUE, SUITE 800	CITY-ST-ZIP: MIAMI FL 33129	5.3 STREET ADDRESS:	5.4 CITY-ST-ZIP:
TITLE: D	NAME: FORSS, ERIC	6.1 TITLE:	6.2 NAME:
STREET ADDRESS: 2730 S.W. THIRD AVENUE, SUITE 800	CITY-ST-ZIP: MIAMI FL 33129	6.3 STREET ADDRESS:	6.4 CITY-ST-ZIP:

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2/11/97 (305) 856-8500

14. I do 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]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: **E. JOSEPH GRADY** Date: **2/11/97** Daytime Phone #: **(305) 856-8500**

CFR2034 (9/96)