

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

FILED
Feb 18 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # F94000003605 (2)
 1. Corporation Name
NUI ENERGY, INC.



Principal Place of Business PO BOX 760 BEDMINSTER NJ 07921-0760	Mailing Address PO BOX 760 BEDMINSTER NJ 07921-0760
---	---

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/11/1994	
21	22	26	27	4. FEI Number 22-3209319	Applied For <input type="checkbox"/> Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
23	24	28	29	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	
Zip	Country	Zip	Country		

9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND RD PLANTATION FL 33324				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 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	D <input checked="" type="checkbox"/> DELETE	1.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KEAN, JOHN	1.2 NAME	Lyle C. Motley, Jr.
STREET ADDRESS	550 RT 202-208	1.3 STREET ADDRESS	955 East 25th Street
CITY-ST-ZIP	BEDMINSTER NJ 07921-0760	1.4 CITY-ST-ZIP	Hialeah, FL 33013
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KEAN, JOHN JR	2.2 NAME	Victor A. Fortkiewicz
STREET ADDRESS	550 RT 202-208	2.3 STREET ADDRESS	One Elizabethtown Plaza
CITY-ST-ZIP	BEDMINSTER NJ 07921-0760	2.4 CITY-ST-ZIP	Union, NJ 07083
TITLE	P <input checked="" type="checkbox"/> DELETE	3.1 TITLE	President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GRUBER, RICHARD L	3.2 NAME	Frank T. Bahluk
STREET ADDRESS	550 ROUTE 202-208	3.3 STREET ADDRESS	550 Route 202/206
CITY-ST-ZIP	BEDMINSTER N	3.4 CITY-ST-ZIP	Bedminster, NJ
TITLE	T <input checked="" type="checkbox"/> DELETE	4.1 TITLE	VT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LURIE, ROBERT F	4.2 NAME	A. Mark Abramovic
STREET ADDRESS	550 ROUTE 202-208	4.3 STREET ADDRESS	550 Route 202/206
CITY-ST-ZIP	BEDMINSTER NJ 07921-0760	4.4 CITY-ST-ZIP	Bedminster, NJ
TITLE	S <input type="checkbox"/> DELETE	5.1 TITLE	VS <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VAN HORN, JAMES R	5.2 NAME	
STREET ADDRESS	550 ROUTE 202-208	5.3 STREET ADDRESS	
CITY-ST-ZIP	BEDMINSTER N	5.4 CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BEHAN, MICHAEL J	6.2 NAME	
STREET ADDRESS	550 ROUTE 202-208	6.3 STREET ADDRESS	
CITY-ST-ZIP	BEDMINSTER N	6.4 CITY-ST-ZIP	

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]* **JAMES R VAN HORN** 1-28-98 908-719-4204

CR2E034 (10/97)