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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

1999

Principal Place of Business

SAVANNAH GA 31402-0576

PO BOX 576

DOCUMENT # F9800003952

COLONIAL ENERGY, INC.

Ī	2. Principal Pl	lace of Business	2a. Mailing A	2a. Mailing Address			4. FEI Number					
Ì	21		26	26				58-2209516				
		Suite, Apt. #, etc.				5. Certificate of Status Desired						
	City & State	е	City & St	City & State  28  Zip Country			6. Election Campaign Financing Trust Fund Contribution					
	Zip 24	Country 25					This corporation owes the current year Int     Personal Property Tax.					
ļ	9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Age						
				81 Name				<del></del>				
	C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				82	Street /	ddress (P.O. Box Number is Not Acceptable)					
	PLAI	NIATION FL 33324			83							
-					84	City			FL 85			
1	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 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 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: F				Registered Agent signature required when reinstating) DATE							
	12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND D							
	TITLE	PC		DELETE 1.	1,1 TITLE		PO		<b>∑</b> Ch			
	NAME	DEMERE, R H JR			-							
İ	STREET ADDRESS	101 N. LATHROP AVE.		1,3 STREET ADDRESS								
	CITY ST. 7ID SAVANNAH GA 31415				4 CITY-S	r-7IP						

Mailing Address PO BOX 576

SAVANNAH GA 31402-0576

FILED Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90238 012 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

Applied For
Not Applicable
\$8.75 Additional
Fee Required
\$5.00 May Be
Added to Fees

□No

3. Date Incorporated or Qualifed

07/10/1998

I DATAMON I E GOOL I										
		84	'		FL	1 1	Zip Co			
office or re	o the provisions of Sections 607.0502 and 607.1508, Florida Statutes, egistered agent, or both, in the State of Florida. Such change was auth in familiar with, and accept the obligations of, Section 607.0505, Florida	orized by	the corpo	corporation submits this statementation's board of directors. I he	ent for the purpose of c reby accept the appoint	hangir ment	ng its re as regis	gistered stered		
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable (NOTE: Re	nistared Ane	nt signature re	equired when reinstation)	DATE					
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS										
TITLE	PC DELETE	1.1 TITLE		PO	-	Cha	ınge	☐ Addition		
NAME	DEMERE, R H JR	1.2 NAME		. •				;		
STREET ADDRESS	101 N. LATHROP AVE.	1.3 STREE	TADDRESS							
CITY-ST-ZIP	SAVANNAH GA 31415	1.4 CITY-5								
TITLE	VTD DELETE	2.1 TITLE				Cha	ange	Addition		
NAME	BROWN, F A	2.2 NAME								
STREET ADDRESS	101 N. LATHROP AVE.	2.3 STREE	T ADDRESS					!		
CITY-ST-ZIP	SAVANNAH GA 31415	2.4 CITY-	ST-ZIP	·						
TITLE	SD DELETE	3,1 TITLE				Cha	ange	Addition		
NAME	WIMBISH, S B	3.2 NAME								
STREET ADDRESS	101 N. LATHROP AVE.	3.3 STREE	T ADDRESS							
CITY-ST-ZIP	SAVANNAH GA 31415	3.4. CITY-	ST-ZIP							
TITLE	C DELETE	4.1 TITLE		CD		Ch:	ange	☐ Addition		
NAME	DEMERE, R. H	4. 2 NAME								
STREET ADDRESS	101 N. LATHROP AVE.	4.3 STREE	T ADDRESS							
CITY-ST-ZIP	SAVANNAH GA 31415	4.4 CITY-5	T-ZIP					<del></del> ,		
TITLE	VD DELETE	5.1 TITLE				Ch	ange	☐ Addition		
NAME	KELLY. B M	5.2 NAME								
STREET ADDRESS	12011 LEE JACKSON HWY.	5.3 STREE	TADDRESS							
CITY-ST-ZIP	FAIRFAX VA 22033	5.4 CITY-8	T-ZIP							
TITLE	V □ DELETE	6.1 TITLE	-			Ch	ange	☐ Addition		
NAME	GETTY, J. W	6.2 NAME	ļ							
STREET ADDRESS	101 N. LATHROP AVE.	6.3 STREE	TADORESS			•				
CITY-ST-ZIP	SAVANNAH GA 31415	6.4 CITY-5								
14. I hereby o	ertify that the information supplied with this filing does not qualify for th	e exemp	ion stated	in Section 119.07(3)(i), Florida	Statutes, I further certi	fy that	the info	ormation		

4. I hereby certify that the information supplied with this filling 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 on the receiver with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OR SIGNING OFFICER OR DIRECTOR

3/10/99

912-236-133/

Daytime Phone #

(ZEU34 (11/98)