TITLE DT DELETE 1.1 TITLE  NAME CRESSMAN, FRANK 401 SOUTH DIXIE HWY. W. PALM BCH FL  TITLE DS DS DELETE 21 TITLE  NAME POWERS, BRIAN SIRRET ADDRESS 16600 SW WARFIELD BLVD ITTLE DV DELETE 21 TITLE  NAME PETER, MARTIN J STREET ADDRESS 101 N.W. 202 TERRACE MIAMI FL  NAME MCINTYRE, JIM STREET ADDRESS CITY-ST-ZPP DANAMA CITY FL  NAME STREET ADDRESS CITY-ST-ZPP ANAMA STREET ADDRESS CITY-ST-ZPP DP DELETE A1 TITLE A1 TITLE A2 DP A4C  CHANGE A4 CITY-ST-ZPP ANAMA CITY FL  DELETE 51 TITLE 52 NAME 53 STREET ADDRESS CITY-ST-ZPP ANAMA CITY FL  DELETE 51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZPP TITLE DELETE 51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZPP TITLE DELETE 51 TITLE Change A4C A4 CITY-ST-ZPP TITLE DELETE 51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZPP DELETE 51 TITLE Change A4C A4 CITY-ST-ZPP TITLE A4C A4 CITY-ST-ZPP TITLE Change A4C A4 CITY-ST-ZPP A4C A4 CITY-S	NON CORP ANNU	NPROFIT PORATION AL REPOR	т 🧶	Secrete DIVISION OF	RTMENT O B. Morthan ary of State	F STATE				
ASSOCIATED GAS DISTRIBUTORS OF FLORIDA, INC.    Maining Additions	OCUN	MENT #	N1337	5 (3)						
Mailing Address   Po Box 395   WEST PAUM BEACH FL 33402   Substitution   Policy			AS DISTRIBUTORS	OF FLORIDA, INC	•		 			
AST PALM BEACH FL 33402 US  SUB-ACH FL 33402 US  3. Date incorporated or Qualified 27 (27 (07) 1986  28. Making Address 28. Certificate of Statut Deserd 29. Specificate of Statut Deserd 27 (27 (07) 48. State 29. State 29. Country 20. Country 20. State 20. Country 21. Deserving State 29. Name and Address of Loursent Registered Agent 29. Name and Address of Loursent Registered Agent 29. Name and Address of Loursent Registered Agent 29. Name and Address of Doursent Registered Agent 29. Stoet Address (P.O. Box Number is Not Acceptable) 29. Name and Address of Doursent Registered Agent 29. Stoet Address (P.O. Box Number is Not Acceptable) 29. Tell Registered Agent 29. Stoet Address (P.O. Box Number is Not Acceptable) 29. Stoet Address (P.O. Box Number is Not Acceptable) 29. Stoet Address (P.O. Box Number is Not Acceptable) 20. Stoet Address (P.O. Box Number is Not Acceptable) 20. Stoet Address (P.O. Box Number is Not Acceptable) 20. Stoet Address (P.O. Box Number is Not Acceptable) 20. Stoet Address (P.O. Box Number is Not Acceptable) 20. Stoet Address (P.O. Box Number is Not Acceptable) 20. Stoet Address (P.O. Box Number is Not Acceptable) 20. Stoet Address (P.O. Box Number is Not Acceptable) 20. Stoet Address (P.O. Box Number is Not Acceptable) 20. Stoet Address (P.O. Box Number is Not Acceptable) 20. Stoet	ncipal Place	of Business		Mailing Address			i i i i i i i i i i i i i i i i i i i			
Suite, Apt, #, etc.	VEST PALM E	Beach fl 3340	é	WEST PALM BEACH F	L 33402		3. Date Incorporated or Qualified	3a. Date	e of Last 02/20/	Report
Suble, Apt. #, etc.    Suble, Apt. #, etc.   S. Certificate of Status Desired   S.75 Additional Fee Required   S.700 May Be Added to Fees   Fee Required   Fee Required   Fee Required   S.700 May Be Added to Fees   Fee Required   Fee Required   Fee Required   S.700 May Be Added to Fees   Fee Required   Fee Required   S.700 May Be Added to Fees   Fee Required   Fee	Principal Pla	ace of Busines	is	2a. Mailing Address			4 FFI Number		Ţ	Applied For
City & State  Ci			···						\$8.75	Additional
Zig			<del> </del>						\$5.0	O May Be
29   Soliting   29   Soliting   29   Soliting   29   Florida Statutes   Yes   No    8. Name and Address of Current Registered Agent   10. Name and Address of New Registered Agent    8. Name		·		28	Col	ıntrv	Trust Fund Contribution	intangible t		
ROGERS, G. D 214 SOUTH MONROE STREET SUITE 701 FIRST FLORIDA BANK BLDG. TALLAHASSEE FL 32302  1. Pursuant to the provisions of Sections 617 6502 and 617,1508 Florida Statutes. He above the corporation submitted in the provisions of Sections 617 6502 and 617,1508 Florida Statutes. He above the corporation submitted in the provisions of Sections 617 6502 and 617,1508 Florida Statutes. He above the corporation submitted in the provision of both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered interest on both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered interests. In the provision and office of both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered interests. In the provision and of the provision and office of both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered and of the provision and office of both in the State of Both in the Stat	Zip	2	5	29	_	····,	Florida Statutes	Yes	No	
AGGNATURE    IGNATURE	AL HEE	SAL FIRST	LI VIDINA BANK BI IVO			100				
12. OFFICERS AND DIRECTORS  DT ITTLE DT OCRESSMAN, FRANK  AU1 SOUTH DIXIE HWY. W. PALM BCH FL DS DELETE DC DELETE DC DELETE DS DELETE DC DELETE DC DELETE DC DELETE DC DELETE DELETE DC	SUITE TALLA	to the provision	32302 ns of Sections 617,0502	and 617.1508, Florida Sta	itutes, the a	84 City	poration submits this statement for the p tion's board of directors. I hereby accep		hanaisa	ite registered
MANE NAME  CRESSMAN, FRANK  401 SOUTH DIXIE HWY. W. PALM BCH FL  DS  CITY-ST-ZIP  POWERS, BRIAN 16600 SW WARFIELD BLVD  CITY-ST-ZIP  INDIANTOWN FL  DV  INDIANTOWN FL  DELETE  31 TITLE  DV  INDIANTOWN FL  DELETE  32 NAME 32 STREET ADDRESS  INDIANT DIXIE  DV  INDIANT DIXIE	SUITE TALLA 1. Pursuant office or i agent. I a	to the provision registered age am familiar with	ns of Sections 617 0502 nt, or both, in the State o h, and accept the obligat	and 617.1508, Florida Sta f Florida, Such change wa ions of, Section 617.0503,	Florida Sta	84 City bove-named cord by the corporatutes.	uired when reinstalling)	ourpose of cot the appoi	changing ntment a	its registered s registered
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