

**FILE NOW: FILING FEE IS \$61.25**

**FILED**

**May 05 1997 8:00am  
Secretary of State**

**NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997**



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

**DOCUMENT # N35390 (6)**

1. Corporation Name

**FLORIDA ENERGY PIPELINE ASSOCIATION, INC.**



Principal Place of Business

Mailing Address

**2337 KILKENNY EAST  
TALLAHASSEE FL 32308**

**2337 KILKENNY EAST  
TALLAHASSEE FL 32308-3108**

3. Date Incorporated or Qualified **11/28/1989** 3a. Date of Last Report **04/01/1996**

4. FEI Number **59-2981910** Applied For  Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

2. Principal Place of Business		2a. Mailing Address	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Country
24	Country	29	Zip
25		30	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**JENSEN, CHRIS L.  
2337 KILKENNY EAST  
TALLAHASSEE FL 32308**

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, 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	<b>DC</b>	<input type="checkbox"/> DELETE
NAME	<b>GAUTHEN, WILEY</b>	
STREET ADDRESS	<b>601 S. LAKE DESTINY RR SUITE 450</b>	
CITY-ST-ZIP	<b>MAITLAND FL</b>	
TITLE	<b>DVC</b>	<input checked="" type="checkbox"/> DELETE
NAME	<b>SCHULTZ, DAVID R</b>	
STREET ADDRESS	<b>100 GATX DR</b>	
CITY-ST-ZIP	<b>TAMPA FL</b>	
TITLE	<b>DST</b>	<input checked="" type="checkbox"/> DELETE
NAME	<b>CULUPCA, RICHARD F.</b>	
STREET ADDRESS	<b>3390 PEACHTREE ROAD NE</b>	
CITY-ST-ZIP	<b>ATLANTA GA</b>	
TITLE	<b>DED</b>	<input type="checkbox"/> DELETE
NAME	<b>JENSEN, CHRIS L</b>	
STREET ADDRESS	<b>2337 KILKENNY E</b>	
CITY-ST-ZIP	<b>TALLAHASSEE FL</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	<b>W. Gauthen</b>
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	<b>DST</b>
5.3 STREET ADDRESS	<b>Jury, Brian K.</b>
5.4 CITY-ST-ZIP	<b>3900 Hamilton Blvd Allentown, PA 18103</b>
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 or is changed or on an attachment with an address.

CR2E037 (9/96)