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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000011337 (1)

HORIZON GAS OF TAMPA, INC.

Principal Place of Business

Mailing Address

SOM N FINER ST

FILED

Feb 17 1998 8:00am

Secretary of State

TAMPA FL 33612		TAMPA FL 33612			DO NOT WRITE IN THIS SPAC	E	
		00			3. Date incorporated or Qualified		
					02/12/1993		
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number Applied For		
21		26			59-3128633 Not Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		E Cartificate of Status Desired	B.75 Additional	
22		27			8. Certificate of Status Desired	Fee Required	
City & Stat	е	City & State	City & State		6. Election Campaign Financing \$	5.00 May Be	
23		28			Trust Fund Contribution		
Zip	Country	Ζip	Country	′	8. This corporation owes or has paid the current year Intangible		
24	[25]	29	30				
g, Name and Address of Current Registered Agent				10, Name and Address of New Registered Agent			
MELVIN, RAY				81 Name			
170	18 E. BUSCH BLVD.		82 Street Address (P.C		Address (P.O. Box Number is Not Acceptable)		
TAI	MPA FL 33612			 			
			83	1			
.•			84	City	FL 85	Zip Code	
office or r	egistered agent, or both, in th	07.0502 and 607.1508, Florida Statu e State of Florida. Such change was e obligations of, Section 607.0505, F	authorized by	y the corp	corporation submits this statement for the purpose of char poration's board of directors. I hereby accept the appointm	nging its registered nent as registered	
SIGNATURE							
	Signature, typed or printed name of regi-			ent signature	Prequired when reinstating) DA1(
12.		RS AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIR	ECTORS IN 12 Change Addition	
TITLE	CPD	☐ DELETE	1.1 TITLE) 	Trange L Modition	
Name	RAY, MELVIN		1.2 NAME				
STREET ADDRESS	1708 E. BUSCH BLVD.		1.3 STREET				
CITY-ST-ZIP	TAMPA FL	DELETE	1.4 CITY - S	ST - ZIP	TX 17	Shapes Addition	
TITLE	TO	□ bettie	2.1 TiTLE		アルン 夕	Change	
NAME	GRAHAM, MICHAEL		2.2 NAME			İ	
STREET ADDRESS	629 N. ST.		2.3 STREET				
CITY-ST-ZIP	BLUEFIELD WY	NA PLUETE	2. 4 CITY - 1	ST - ZiP		Share - 1 4 4 4 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	
TITLE	V	DELETE	3.1 TATLE			Change L Addition	
NAME	SEPESSY, JOHN		3.2 NAME				
STREET ADDRESS	1708 E. BUSCH BLVD.		3.3 STREET				
CITY-ST-ZIP	TAMPA FL	DELETE	3.4 CITY-5	S1 - ZIP	П,	hanna Addition	
TITLE	DS		4.1 TITLE			Change L Addition	
NAME	MCGLOTHLIN, MICHAEI		4. 2 NAME				
STREET ADDRESS	SECOND ST., GREEN A	ICHES ESTATES	4.3 STREET				
CITY-ST-ZIP	POUNDING MILL VA	DELETE	4.4 CITY - S	T-ZIP		Change D Addition	
TITLE		L. DELETE	5.1 TITLE			Change D Addition	
NAME			52 NAME			1/12	
STREET ADDRESS			53 STREFT		XA)	<i>୬// -</i> ↓	
CITY-ST-ZIP		Print	5.4 CITY-S	1 · ZIP	/ / / / / / / / / / / / / / / / / / /	TANGET AND TO A PARTY OF THE PA	
TITLE		☐ DELET E	61 THILE		200002434572	Change [] Addition	
NAME			62 NAME		-02/19/9801002004	***	
STREET ADDRESS			6.3 STREET				
CITY-ST-ZIP			6.4 CITY - S	1-21P	***1200.00		

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.