## 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 703309** 

Entity Name: THE FLORIDA NATURAL GAS ASSOCIATION, INC.

**FILED** Feb 14, 2018 **Secretary of State** CC9230246578

## **Current Principal Place of Business:**

201 S MONROE STREET **UNIT A** 

TALLAHASSEE, FL 32301

## **Current Mailing Address:**

PO BOX 11026

TALLAHASSEE, FL 32302 US

FEI Number: 59-2354981 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CALHOUN, B. DALE 201 S. MONROE STREET **UNIT A** TALLAHASSEE, FL 32301 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: B. DALE CALHOUN 02/14/2018

> Electronic Signature of Registered Agent Date

> > Address

Officer/Director Detail:

Title DIRECTOR, TREASURER Title DIRECTOR

GEOFFROY, THOMAS A CALHOUN, B. DALE Name Name

4619 NW 53RD AVENUE 201 S. MONROE STREET Address Address

**UNIT A** City-State-Zip: GAINESVILLE FL 32653

City-State-Zip: TALLAHASSEE FL 32301

Title DIRECTOR, SECRETARY Title DIRECTOR, PRESIDENT

Name KING, GORDON Name FLOYD, KANDI

PO BOX 548 Address 702 N FRANKLIN STREET Address

City-State-Zip: VALPARAISO FL 32580 PLAZA 6

City-State-Zip: TAMPA FL 33602 Title DIRECTOR, VP

Title DIRECTOR, VP Name TADROS, MEDHAT

Name BERMUDEZ, CAROLYN Address 2602 JACKSON BLUFF ROAD

TALLAHASSEE FL 32304 City-State-Zip: City-State-Zip: HIALEAH FL 33013

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

955 E 25TH STREET