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.

SIGNATURE: B. DALE CALHOUN

Electronic Signature of Signing Officer/Director Detail

DIRECTOR

02/06/2019

## 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 718367

Entity Name: FLORIDA PROPANE GAS ASSOCIATION, INC.

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

201 SOUTH MONROE STREET UNIT A TALLAHASSEE, FL 32301

### **Current Mailing Address:**

POST OFFICE BOX 11026 TALLAHASSEE, FL 32302 US

### FEI Number: 59-0719074

#### Name and Address of Current Registered Agent:

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

# Certificate of Status Desired: No

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		02/06/2019		
	Electronic Signature of Registered Agent			Date
Officer/Direc	ctor Detail :			
Title	FIRST VP, DIRECTOR	Title	DIRECTOR	
Name	POWERS, BRIAN	Name	CALHOUN, B. DALE	
Address	PO BOX 8	Address	201 SOUTH MONROE STREET UNIT A	
City-State-Zip:	INDIANTOWN FL 34956	City-State-Zip:	TALLAHASSEE FL 32301	
Title	IMMEDIATE PAST PRESIDENT, DIRECTOR	Title	PRESIDENT, DIRECTOR	
Name	FISHER, CRAIG	Name	ROBERTSON, ROBBIE	
Address	4520 36TH STREET	Address	414 W 9TH STREET	
City-State-Zip:	ORLANDO FL 32811	City-State-Zip:	SANFORD FL 32771	
Title	SECOND VP, DIRECTOR	Title	SECRETARY, TREASURER, DIRECTOR	
Name	BAHR, KEVIN	Name	LYNCH, DEBRA	
Address	4441 ALLEN ROAD	Address	5000 SAWGRASS VILLAGE CIF STE 4	RCLE
Uny-State-ZIP:	ZEPHYRHILLS FL 33541	City-State-Zip:		082

FILED Feb 06, 2019 Secretary of State 3674493803CC

Date