

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 158008

FILED
Apr 19, 2010
Secretary of State

Entity Name: FLO-GAS CORPORATION

Current Principal Place of Business:

909 SILVER LAKE BLVD.
DOVER, DE 19904 US

New Principal Place of Business:

Current Mailing Address:

909 SILVER LAKE BLVD.
DOVER, DE 19904 US

New Mailing Address:

FEI Number: 59-6050730

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYES STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P
Name: SCHIMKAITIS, JOHN R
Address: 909 SILVER LAKE BLVD.
City-St-Zip: DOVER, DE 19904 US

Title: EVP
Name: MCMASTERS, MICHAEL P
Address: 909 SILVER LAKE BLVD.
City-St-Zip: DOVER, DE 19904 US

Title: VST
Name: COOPER, BETH W
Address: 909 SILVER LAKE BLVD.
City-St-Zip: DOVER, DE 19904 US

Title: SVP
Name: THOMPSON, STEPHEN C
Address: 909 SILVER LAKE BLVD.
City-St-Zip: DOVER, DE 19904 US

Title: COO
Name: STEIN, CHARLES L
Address: 401 SOUTH DIXIE HIGHWAY
City-St-Zip: WEST PALM BEACH, FL 33401

Title: CFO
Name: BACHMAN, GEORGE M
Address: 401 SOUTH DIXIE HIGHWAY
City-St-Zip: WEST PALM BEACH, FL 33401

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BETH W COOPER

VST

04/19/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date