

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
Feb 20, 1996 08:00 AM
Secretary of State

DOCUMENT # **345129** (1)

1. Corporation Name

LINDA JO'S BOTTLE GAS COMPANY



Principal Place of Business

Mailing Address

**3711 TROUT RIVER BLVD.
JACKSONVILLE FL 32208**

**3711 TROUT RIVER BLVD.
JACKSONVILLE FL 32208**

3. Date Incorporated or Qualified

04/24/1969

3a. Date of Last Report

02/28/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24 25 29 30

4. FEI Number

59-1230449

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**DINGMAN, RAYMOND SR
5923 SOUTEL DRIVE
JACKSONVILLE FL 32209**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.05(2) and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Raymond Dingman

(The Registered Agent's signature is required when registering)

2-14-96

DATE

12. OFFICERS AND DIRECTORS

TITLE

P

☐ DELETE

NAME

DINGMAN, RAYMOND, SR.

STREET ADDRESS

5923 SOUTEL DRIVE

CITY-ST-ZIP

JACKSONVILLE FL 32209

TITLE

V

☐ DELETE

NAME

DINGMAN, RAYMOND, JR.

STREET ADDRESS

5923 SOUTEL DRIVE

CITY-ST-ZIP

JACKSONVILLE FL 32209

TITLE

ST

☐ DELETE

NAME

DEXTER, RAE H

STREET ADDRESS

5923 SOUTEL DR.

CITY-ST-ZIP

JACKSONVILLE FL 32209

TITLE

T

☐ DELETE

NAME

DINGMAN, MELISSA

STREET ADDRESS

5923 SOUTEL DR.

CITY-ST-ZIP

JACKSONVILLE FL 32209

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change

☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

☐ Change

☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☐ Change

☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change

☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change

☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change

☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change

☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 its 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.

SIGNATURE:

Raymond Dingman

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-14-96

Date

Day/Date Printed #

CR2E034 (12/95)