

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 10, 2006 08:00 AM
Secretary of State

DOCUMENT # 355533

1. Entity Name
ALLSTATE GAS COMPANY OF FLORIDA INC



Principal Place of Business
**3928 BROOKDALE CT
JACKSONVILLE, FL 32277-1317 US**

Mailing Address
**3928 BROOKDALE CT
JACKSONVILLE, FL 32277-1317 US**



01092006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1280843

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**SMITH, LINDA M
3928 BROOKDALE CT
JACKSONVILLE, FL 32277-1317**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE PD
NAME SMITH, LINDA M
STREET ADDRESS 3928 BROOKDALE CT
CITY-ST-ZIP JACKSONVILLE, FL 322771317

TITLE TD
NAME LENZ, DEBORAH M.
STREET ADDRESS 8231 E. MALCOMB DRIVE
CITY-ST-ZIP SCOTTSDALE, AZ 852505627

TITLE SD
NAME SMITH, RICHARD W
STREET ADDRESS 3928 BROOKDALE CT
CITY-ST-ZIP JACKSONVILLE, FL 322771317

TITLE VO
NAME BLAU, DIANNA M
STREET ADDRESS 3928 BROOKDALE COURT
CITY-ST-ZIP JACKSONVILLE, FL 322771317

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

000000497557
04/22/06-80060-010 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Richard W. Smith

RICHARD W. SMITH

04/06/06

904-743-8195

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #