

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 415122

FILED
Feb 07, 2012
Secretary of State

Entity Name: TRU-GAS OF FLORIDA, INC.

Current Principal Place of Business:

ARROWOOD MANUFACTURED HOME COMM.
3500 FELL ROAD
WEST MELBOURNE, FL 32901

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 429
LA CROSSE, WI 546020429

New Mailing Address:

FEI Number: 59-1443725

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORRIS, SHEREE
3500 FELL ROAD
WEST MELBOURNE, FL 32901 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

OFFICERS AND DIRECTORS:

Title: T
Name: LINTON, RICHARD A
Address: 108 CALLA COURT
City-St-Zip: ONALASKA, WI 54650

Title: PDC
Name: SENTRY, JAMES A
Address: 853 COUNTRY CLUB LANE
City-St-Zip: ONALASKA, WI 54650

Title: S
Name: HISER, VONA J
Address: 862 ASPEN VALLEY DR
City-St-Zip: ONALASKA, WI 54650

Title: D
Name: SHEA, JEREMY C
Address: 7304 CEDAR CREEK TRAIL
City-St-Zip: MADISON, WI 53717

Title: VD
Name: SENTRY, PAUL J
Address: 7633 HIDDEN SAVANNAH CT
City-St-Zip: VERONA, WI 53593

Title: AS
Name: MORRIS, SHEREE A
Address: 311 SIXTH AVENUE
City-St-Zip: MELBOURNE BEACH, FL 32951

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: RICHARD LINTON

TREA

02/07/2012

Electronic Signature of Signing Officer or Director

Date