

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 27, 1999 8:00 am
Secretary of State

02-27-1999 90065 017 ***150.00

DOCUMENT # 508007

1. Corporation Name

PIPELINE UTILITIES INCORPORATED

Principal Place of Business

GARDEN INDUSTRIAL PARK
3610 FISCAL CT
RIVIERA BCH. FL 33404-1754

Mailing Address

GARDEN INDUSTRIAL PARK
3610 FISCAL CT
RIVIERA BCH. FL 33404-1754

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/28/1976

4. FEI Number

59-1684417

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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

CRADDOCK, RUTH ANN
6820 140TH LN
PALM BCH GDNS FL 33418

10. Name and Address of New Registered Agent

81 Name

J. David Craddock

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

6914 141st Lane

83

Palm Bch Gdns FL 33418

84 City

Palm Bch Gdns

FL

85 Zip Code
33418

11. Pursuant to the provisions of Sections 607.0502 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

J. David Craddock

1/20/99

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CBD
CRADDOCK, RUTH ANN
6820 140TH LANE
PALM BCH GDNS FL 33418-7245

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
COBD
CRADDOCK, JIM K.
6820 140TH AVE
PALM BCH GDNS FL 33418-7245

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
YOUNG, JOYCE E
4396 BIRDWOOD STREET
PALM BEACH GARDENS FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PDSG
CRADDOCK, JAMES DAVID
6914 141ST LANE
PALM BEACH GARDENS FL 33418-7245

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
TYO, RANDY S
1073 SPRUCE RIDGE DRIVE
STUART FL 34994

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
BAKER, CATHERINE ANN
18364 FLAGSHIP CIRCLE
JUPITER FL 33458

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 the 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

J. David Craddock

1/20/99

Date

(561) 842-8833

Daytime Phone #

CR2E034 (11/98)