

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 833570 (5)

1. Corporation Name

NATIONAL PROPANE CORPORATION



Principal Place of Business

P.O. BOX 2067
1101 SECOND AVENUE SE
CEDAR RAPIDS IA 52406-2067
US

Mailing Address

P.O. BOX 2067
1101 SECOND AVENUE SE
CEDAR RAPIDS IA 52406-2067
US

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
C/O CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION FL 33324

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 607.0502 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

Signature of the person authorized to register the agent, or both, in the State of Florida.

Signature of the person authorized to register the agent, or both, in the State of Florida.

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

PCEO
PALIUGHI, RONALD D.
1101 SECOND AVENUE SE
CEDAR RAPIDS IA 52406-2067

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

S
ROSEN, STUART I.
900 THIRD AVENUE, 31ST FLOOR
NEW YORK NY 10022

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

VP
MCCARRON, FRANCIS T.
900 THIRD AVENUE, 31ST FLOOR
NEW YORK NY 10022

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

V
CROWE, ROBERT J.
900 THIRD AVENUE, 31ST FLOOR
NEW YORK NY 10022

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D
MAY, PETER W.
900 THIRD AVENUE, 31ST FLOOR
NEW YORK NY 10022

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D
KALVARIA, LEON
900 THIRD AVENUE, 31ST FLOOR
NEW YORK NY 10022

☒ DELETE

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

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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 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.

SIGNATURE: Robert J. Crowe, Assistant Vice President-Taxes

4/23/96

212-230-3115

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034 (12/95)