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STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 833570 (5)

1. Corporation Name
NATIONAL PROPANE CORPORATION

Principal Place of Business

Mailing Address

200 FIRST STREET SE
SUITE 1700
CEDAR RAPIDS IA 52401
US

200 FIRST STREET SE
SUITE 1700
CEDAR RAPIDS IA 52401
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/02/1975

4. FEI Number

11-1723340

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 or has paid the current year Intangible
Personal Property Tax due June 30

☒ Yes

☐ No

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

9. Name and Address of Current Registered Agent

10. Name and Address of New 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, type or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PCEO ☒ DELETE

NAME PALIUGHI, RONALD D.
STREET ADDRESS 200 FIRST STREET SE, STE. 1700
CITY-ST-ZIP CEDAR RAPIDS IA

TITLE S ☐ DELETE

NAME ROSEN, STUART I.
STREET ADDRESS 280 PARK AVENUE
CITY-ST-ZIP NEW YORK NY

TITLE VP ☐ DELETE

NAME MCCARRON, FRANCIS T.
STREET ADDRESS 280 PARK AVENUE
CITY-ST-ZIP NEW YORK NY

TITLE VP ☐ DELETE

NAME WATSON, DAVID C.
STREET ADDRESS 200 FIRST STREET SE, STE. 1700
CITY-ST-ZIP CEDAR RAPIDS IA

TITLE D ☐ DELETE

NAME MAY, PETER W.
STREET ADDRESS 280 PARK AVENUE
CITY-ST-ZIP NEW YORK NY

TITLE D ☐ DELETE

NAME PELTZ, NELSON
STREET ADDRESS 280 PARK AVENUE
CITY-ST-ZIP NEW YORK NY

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PCOO ☐ Change ☒ Addition

1.2 NAME Ronald R. Rominiecki
1.3 STREET ADDRESS 200 First Street SE, Suite 1700
1.4 CITY-ST-ZIP Cedar Rapids, IA 52401

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME 000002513030-3
2.3 STREET ADDRESS -05/05/98--01042--001
2.4 CITY-ST-ZIP ***1626.25 ****150.00

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

SCC 5-5-98

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 in an attachment with an address.

CR2E034 (10/97)