

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 # 843993

(7)

1. Corporation Name

FPL FUELS, INC.



Principal Place of Business

Mailing Address

% D M DONALDSON
ONE INTERNATIONAL PL
BOSTON MA 02110
US

% JH HOLDINGS CORP
PO BOX 4024
BOSTON MA 02101
US

3. Date Incorporated or Qualified
08/27/1979

3a. Date of Last Report
02/16/1995

2. Principal Place of Business

2a. Mailing Address

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4. FEI Number

13-2992456

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 has liability for intangible tax under s 199.032,
Florida Statutes ☒ Yes ☐ No

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYES STREET
TALLAHASSEE FL 32301

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE
NAME SMITH, NANCY D.
STREET ADDRESS 39 SOUTH TERRACE
CITY-ST-ZIP BEVERLY MA

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP Beverly, MA 01955

TITLE SD ☐ DELETE
NAME COLBY, LOUISE E.
STREET ADDRESS 11 CAZENOVE STREET
CITY-ST-ZIP BOSTON MA

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP Boston, MA 02116

TITLE V ☒ DELETE
NAME TRAN, LANNHI
STREET ADDRESS 97 BAY STATE ROAD
CITY-ST-ZIP BOSTON MA

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME VP
3.3 STREET ADDRESS Tiffany L. Percival
3.4 CITY-ST-ZIP 15 George Road
Winchester, MA 01890

TITLE AS ☒ DELETE
NAME SULLIVAN, LAURIE A.
STREET ADDRESS 6 BOUNDARY ROAD
CITY-ST-ZIP MALDEN MA

4.1 TITLE ☒ Change ☐ Addition
4.2 NAME AS
4.3 STREET ADDRESS Laurie A. Fitzgerald
4.4 CITY-ST-ZIP 63 Lawrence Street
Malden, MA 02148

TITLE T ☐ DELETE
NAME DONALDSON, R. DOUGLAS
STREET ADDRESS 28 GRANT STREET
CITY-ST-ZIP NEEDHAM MA

5.1 TITLE ☒ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP Needham, MA 02192

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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 in an attachment with an address.

SIGNATURE:

R. Douglas Donaldson, Treasurer

Date

Daytime Phone #

1/30/96 617-951-7690

CR2E034 (12/95)