

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A96000000621

1. Entity Name

GAS ENTERPRISES, LTD.

FILED

00 JAN 24 PM 4:19

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

2942 HARTLEY RD. SUITE #1  
JACKSONVILLE FL 32257

Mailing Address

2942 HARTLEY RD. SUITE #1  
JACKSONVILLE FL 32257-8221

2. Principal Place of Business

13902 Mandarin Oaks Lane

3. Mailing Address

13902 Mandarin Oaks Lane

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
Jacksonville, Florida

City & State  
Jacksonville, Florida

4. FEI Number 59-3371298

Applied For

Not Applicable

Zip  
32223

Country  
USA

Zip  
32223

Country  
USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

STRONG, GERALD W  
13902 MANDARIN OAKS LANE  
JACKSONVILLE FL 32223

7. Name and Address of New Registered Agent

Name

Angela M. Strong

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

13902 Mandarin Oaks Lane

City  
Jacksonville

FL

Zip Code  
32223

8. 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

*Angela M. Strong* Angela M. Strong

1-14-00

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions as Shown on record.

\$75,000.00

10. Amount of Capital Contributions in FLORIDA to date.

\$75,000.00

11. MAKE CHECK PAYABLE TO DEPT. OF STATE  
SEE REVERSE SIDE FOR FEE INFORMATION

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**  
**NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

DOCUMENT # P96000027661  
NAME GAS ENTERPRISES, INC.  
STREET ADDRESS 13902 MANDARIN OAKS LANE  
CITY - ST - ZIP JACKSONVILLE FL 32223

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY - ST - ZIP

500003145015-3

STREET ADDRESS

-02/23/00--01088--009

CITY - ST - ZIP

\*\*\*\*526.25 \*\*\*\*526.25

STREET ADDRESS

CITY - ST - ZIP

STREET ADDRESS

CITY - ST - ZIP

STREET ADDRESS

CITY - ST - ZIP

STREET ADDRESS

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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

*Angela M. Strong* Angela M. Strong

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

1-14-00

Date

904-262-3574

Daytime Phone #

CR2E003 (9/99)