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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F53693**1. Corporation Name

(0)

SOUTHERN PROPANE INC.

Principal Place of Busine	58
% CARLTON B. RUTLED	GΕ
2711 DUNNS AVE.	-
JACKSONVILLE FL 3221	В

SIGNATURE:

Mailing Address

% CARLTON B. RUTLEDGE 2711 DUNNS AVE. JACKSONVILLE FL 32218-4659 FILED Jan 28 1997 8:00am Secretary of State



Cayun 7,64 F 0065

JACKSONVILLE FL 32218		JACKSONVILLE	JACKSONVILLE FL 32218-4658			3. Date incorporated or Qualified 3a. Date of Last Report 03/13/1996			
2 Principal P.	are ni B. mine.co	2a Mailing Addre	Sec			4. FEI Number			oplied For
21	Principal Place of Business 2a. Mailing Address 26					59-2177841		·	ot Applicable
Suite, Apt 4	# <et.:< td=""><td>Suite, Apt. #.</td><td>etc</td><td></td><td></td><td>30 2 11 1041</td><td></td><td></td><td>Additional</td></et.:<>	Suite, Apt. #.	etc			30 2 11 1041			Additional
22 27						5. Certificate of Status Desired Fee Required			
City & State City & State 23 28						6. Election Campaign Financing Trust Fund Contribution		\$5.00 Added t	May Be to Fees
Zip 24	Zip Country Zip Cou 25 29 30				,	8. This corporation has liability for Florida Statutes	intangible Yes		. 199.032,
	9. Name and Address of Cui		1421	T	*****	10. Name and Address of New Re			
RU	TLEDGE, CARLTON B.			81	Name			-	
2711 DUNNS AVE.				82	Ctropt Addr	ess (P.O. Box Number is Not Acceptat	-10\		
JACKSONVILLE FL 32218					Street Addi	ess (P.O. Box Number is Not Acceptar	jie)		
				83					
				-	0			T 1	<u> </u>
				84	City		FL	85 Zip	Code
11. Pursuani t	o the provisions of Sections 607	0502 and 607.1508, Florid	la Statutes, the	above	e-named corp	oration submits this statement for the	ourpose of	changing it	ts registered
office or 18	egistered agent, or both, in the St infamiliar with, and accept the of	ate of Florida, Such chang disalions of Spetian 607.0	ge was authorize 1505, Florida St	ed by	the corporat	ion's board of directors. I hereby acce	pt the app o	ointment as	registered
	Carlton B		2000, Florida Sa	nioles	J.	,	16 1	١ ٣	
SIGNATURE	Signation, typed or per training of regetered		(NOTE: Register	red Age	ent signature requir	ed when reinstating)	-16-9	1	
12.		AND DIRECTORS	13			ADDITIONS/CHANGES TO OFFIC	SERS AND	DIRECTOR	RS IN 12
TiffLE	DP		DELETE 1.1					Change	Addition
NAME	IAME RUTLEDGE, CARLTON 1.2 301 SILVERSMITH LANE 1.3 1.3			1.2 NAMÉ					
					ADDRESS				
ì				CITY-ST-ZIP					
CITY-SI-7-P TITLE		DE		TITLE	51 - ZiP			Change	Additio
NAMÉ		L 5t.	I * '	NAME				orango	Addition
					ADDRESS				
STHEET ADDRESS			1		ADDRESS				
CITY-ST-ZIP		DE			ST-ZIP			Change	Addition
TITLE				TITLE				L. Dilange	L. Addition
NAME				NAME					
STREET ADDRESS			3.3	STREET	ADDRESS				
CITY - S1 - Zif-					SI - ZIP			<u> </u>	
TITLE		☐ DE	LEIE 41	TITLE				☐ Change	L Addition
NAME			4 2	NAME					
STREET ADDRESS			4.9	STREET	ADDRESS				
CHY-ST ZIP				CITY-S	ST - 71P				
TITLE		[_] D£	LETE 5.1	TITLE				☐ Change	Addition
NAME			5.2	NAME					
STREET ADDRESS		4	5.3	STREET	ADDRESS				
City - SY - ZiP			* / * / ******************************	C/TY-S	ST - ZIP			-	
TITLE		☐ DE	LETE 6.1	TITLE				☐ Change	☐ Addition
N4ME			6.2	NAME					
STREET ADDRESS			6.3	STREET	ADDRESS				
CITY - ST - ZIP			6.4	CITY-5	ST-ZIP				