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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT. # F57099

GLADES GAS CO., INC.

FILED Feb 13, 1999 8:00am **Secretary of State**

02-13-1999 90027 042 ***150.00



Mailing Address Principal Place of Business 309 E. SUGARLAND HIGHWAY 309 E. SUGARLAND HIGHWAY **CLEWISTON FL 33440** CLEWISTON FL 33440 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 11/25/1981 2a. Mailing Address 4. FEI Number Applied For 2. Principal Place of Business Not Applicable 59-2147939 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 6. Election Campaign Financing \$5.00 May Be City & State City & State Trust Fund Contribution Added to Fees 28 23 Zip Country 8. This corporation owes the current year Intangible Zip □No Personal Property Tax. 30 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent MCCARTHY, DANIEL M Street Address (P.O. Box Number is Not Acceptable) 309 E SUGARLAND HWY **CLEWISTEN FL 33440** 83 85 84 City 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. □ DELETE ☐ Change 1.1 TITLE TITLE MCCARTHY, KEVIN S 1.2 NAME NAME 309 E SUGARLAND HWY 1.3 STREET ADDRESS STREET ADDRESS CLEWISTON, FL 0 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition □ DELETE 2.1 TITLE TITLE 2.2 NAME MCCARTHY, DEBORAH NAME 2.3 STREET ADDRESS 312 N DEANE DUFF AVE STREET ADDRESS **CLEWISTON FL 33440** 2.4 CITY-ST-ZIP CITY-ST-ZIP Change DELETE ☐ Addition 3.1 TITLE TITLE MCCARTHY, DANIEL M 3.2 NAME NAME 309 E. SUGARLAND HWY. 3.3 STREET ADDRESS STREET ADDRESS **CLEWISTON FL** 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition DELETE 51TM F TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP

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 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

SIGNATURE:

CR2E034 (11/98)