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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F75374

Z - GAS COMPANY, INC.

Mailing Address Principal Place of Business 2794 OLD BALDWIN RD 2794 OLD BALDWIN RD CALLAHAN FL 32011 CALLAHAN FL 32011

FILED Mar 25, 1999 8:00 am **Secretary of State**

03-25-1999 90012 003 ***150.00



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 04/06/1982 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business 59-2220933 Not Applicable 26 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State \$5.00 May Be City & State 6. Election Campaign Financing \Box Trust Fund Contribution Added to Fees 23 Country Country Zip 8. This corporation owes the current year intangible Zìp. \square No XX Yes 30 Personal Property Tax. 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name HIGGINBOTHOM, HENRY Street Address (P.O. Box Number is Not Acceptable) 2794 OLD BALDWIN RD CALLAHAN FL 32011 83 84 Zip Code City 85 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) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12 ☐ Addition DELETE 1.1 TITLE TITLE PSTD HIGGINBOTHOM, HENRY 1.2 NAME NAME 2794 OLD BALDWIN RD 1.3 STREET ADDRESS STREET ADDRESS CALLAHAN FL 32011 1.4 CITY-ST-ZIF CITY-ST-ZIP ☐ Change ☐ Addition ☐ DELETE 2.1 TITLE TITLE ח ZELL, DONALD D 2.2 NAME NAME 2.3 STREET ADDRESS 8604 SAN SEVERA DR STREET ADDRESS JACKSONVILLE FL 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 3.1 TITLE ☐ Change ☐ Addition TITLE 3.2 NAME HIGGINBOTHOM, DONALD H NAME 3.3 STREET ADDRESS 2923 HONEY BEE LN STREET ADDRESS CALLAHAN FL 32011 3.4. CiTY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ DELETE TITLE 4.1 TITLE HIGGINBOTHOM, PATRICIA 2857 HONEY DEW DR 4.3 STREET ADDRESS STREET ADDRÉS CALLAHAN FL 32011 4.4 CITY-ST-ZIF CITY-ST-ZiP DELETE 5.1 TITLE ☐ Change ☐ Addition TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIF CITY-ST-ZIP DELETE 6.1 TITLE Change ☐ Addition TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 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

CITY-ST-ZIP

(11/98)

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