

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT
CORPORATION
ANNUAL REPORT
1996**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F93000000478 (8)

1. Corporation Name
ENI INC.



Principal Place of Business Mailing Address
**1516 TWEED ST
COLORADO SPRINGS CO 80909
US** **1516 TWEED STREET
COLORADO SPRINGS CO 80909-2845
US**

3. Date Incorporated or Qualified **02/03/1993** 3a. Date of Last Report **05/22/1995**
4. FEI Number **84-1116488** 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

2. Principal Place of Business 2a. Mailing Address
21 **1500 Garden of the Gods Rd.** 26 **1500 Garden of the Gods Rd.**
Subj., Apt. #, etc. State, Apt. #, etc.
22 City & State 27 City & State
23 **Colorado Springs, CO** 28 **Colorado Springs, CO**
Zip Country Zip Country
24 **80907** 25 **U.S.** 29 **80907** 30 **U.S.**

9. Name and Address of Current Registered Agent

**DOEGE, LARRY B
4500 PALM COAST PARKWAY, SE
PALM COAST FL 32137**

10. Name and Address of New Registered Agent

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 of Registered Agent required when changing)

(Signature of Registered Agent required when changing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DCP	☐ DELETE
NAME	JONES, HARVEY L	
STREET ADDRESS	1516 TWEED ST.	
CITY-STATE-ZIP	COLORADO SPRINGS CO 80909-2845	
TITLE	ST	☐ DELETE
NAME	JONES, PEGGIE R	
STREET ADDRESS	1516 TWEED ST.	
CITY-STATE-ZIP	COLORADO SPRINGS CO 80909-2845	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	Vice President	☐ Change ☐ Addition
12 NAME	Curtis W. Brunt, Jr.	
13 STREET ADDRESS	6160 Tuckerman Lane	
14 CITY-STATE-ZIP	Colorado Springs, CO 80918	
21 TITLE		☐ Change ☐ Addition
22 NAME		
23 STREET ADDRESS		
24 CITY-STATE-ZIP		
31 TITLE		☐ Change ☐ Addition
32 NAME		
33 STREET ADDRESS		
34 CITY-STATE-ZIP		
41 TITLE		☐ Change ☐ Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-STATE-ZIP		
51 TITLE		☐ Change ☐ Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-STATE-ZIP		
61 TITLE		☐ Change ☐ Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-STATE-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 on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DAY

DAYTIME PHONE #

CR2E034 (12/95)