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 # H63322 (2)

1. Corporation Name

GRIFFIS GAS OF GAINESVILLE, INC.

Principal Place of Business:
% HENRY G. GRIFFIS, JR.
6641 103RD ST.
JACKSONVILLE FL 32210-7133

Mailing Address:
% HENRY G. GRIFFIS, JR.
6641 103RD ST.
JACKSONVILLE FL 32210-7133

3. Date Incorporated or Qualified: 06/20/1985
3a. Date of Last Report: 05/01/1995
4. FEI Number: 59-2543828 [ ] 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
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

9. Name and Address of Current Registered Agent

GRIFFIS, HENRY G., JR.
6641 103RD ST.
JACKSONVILLE FL 32210

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 617.0502, 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 ______ DATE ______

12. OFFICERS AND DIRECTORS

TITLE	DC	[ ] DELETE
NAME	GRIFFIS, HENRY G., SR.	
STREET ADDRESS	6641 103RD ST.	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE	DP	[ ] DELETE
NAME	GRIFFIS, HENRY G., JR.	
STREET ADDRESS	6641 103RD ST	
CITY-ST-ZIP	JACKSONVILLE, F	
TITLE	D	[ ] DELETE
NAME	GRIFFIS, IDA L.	
STREET ADDRESS	6641 103RD ST	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE	ST	[ ] DELETE
NAME	CUNNINGHAM, SHARON L.	
STREET ADDRESS	6641 103RD ST.	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE	V	[X] DELETE
NAME	MOSLEY, RONALD D	
STREET ADDRESS	6641 103RD ST	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE	AT	[ ] DELETE
NAME	TATE, WILLIAM T	
STREET ADDRESS	6641 103RD ST	
CITY-ST-ZIP	JACKSONVILLE FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		[ ] Change [ ] Addition
2 TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		[ ] Change [ ] Addition
3 TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		[ ] Change [ ] Addition
4 TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		[ ] Change [ ] Addition
5 TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AS MOSLEY, DIANA 6641 103RD STREET JACKSONVILLE, FL 32210	[ ] Change [X] Addition
6 TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		[ ] Change [ ] Addition

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 report or supplemental 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] 2/16/96 904-771-4340

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

William T. Tate

CR2E034 (12/95)