


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

FILED  
Jan 28 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **J40721** (9)  
1. Corporation Name  
**QUALITY PROPANE, INC.**

Principal Place of Business <b>302 W. 9TH AVENUE HAVANA FL 32333</b>	Mailing Address <b>302 W. 9TH AVENUE HAVANA FL 32333</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>11/03/1986</b>	
21		26		4. FEI Number <b>59-2727215</b>	Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	
22		27		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
City & State		City & State		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
23		28			
Zip	Country	Zip	Country		
24	25	29	30		

9. Name and Address of Current Registered Agent <b>DUNCAN, MORRIS O. 302 W 9TH AVENUE HAVANA FL 32333</b>				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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
<input type="checkbox"/> DELETE				<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE	P	DUNCAN, MORRIS O.		1.1 TITLE			
NAME	DUNCAN, MORRIS O.			1.2 NAME			
STREET ADDRESS	RT 3 BOX 5355			1.3 STREET ADDRESS			
CITY - ST - ZIP	HAVANA FL			1.4 CITY - ST - ZIP			
TITLE	D	DUNCAN, MORRIS O.		2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	DUNCAN, MORRIS O.			2.2 NAME			
STREET ADDRESS	RT 3 BOX 5355			2.3 STREET ADDRESS			
CITY - ST - ZIP	HAVANA FL			2.4 CITY - ST - ZIP			
TITLE		DUNCAN, MARY JO		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	DUNCAN, MARY JO			3.2 NAME			
STREET ADDRESS	RT 3, BOX 5355			3.3 STREET ADDRESS			
CITY - ST - ZIP	HAVANA FL			3.4 CITY - ST - ZIP			
TITLE	ST	DUNCAN, RENEE S		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	DUNCAN, RENEE S			4.2 NAME			
STREET ADDRESS	2100 RAINBOW DRIVE APT 4111			4.3 STREET ADDRESS			
CITY - ST - ZIP	ARLINGTON TX			4.4 CITY - ST - ZIP			
TITLE				5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY - ST - ZIP				5.4 CITY - ST - ZIP			
TITLE				6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY - ST - ZIP				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 Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Morris O. Duncan 1-17-98 850-539-5427

CR2E034 (10/97)