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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # K49361

(4)

ENERGY RESOURCES OF SOUTH FLORIDA, INC.

Principal Place of Business

Mailing Address

FILED Apr 27 1998 8:00am Secretary of State



14614 TANGELO BLVD 14614 TANGELO BLVD. W. PALM BEACH FL 33412 W. PALM BEACH FL 33412 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/06/1988 2. Principal Place of Business Mailing Address 4, FEI Number Applied For 196 PARK PLACE 196 PARK PLACE 65-0092230 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangrole Alun BEA 29 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name VREELAND, KEITH F 14614 TANGELO BLVD. 82 Address P.O. Box Number is Not Acceptable) W. PALM BEACH FL 33412 83 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, end accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE **DELETE** 1.1 TITLE Change VREELAND, KEITH F NAME 1.2 NAME 14614 TANGELO BLVD. STREET ADDRESS 1.3 STREET ADDRESS W. PALM BEACH FL 33412 1.4 CITY-ST-ZIP CHY-SI-ZIP DELETE Change TITLE 2.1 TITLE NAME ROBINETTE, PATRICIA 2.2 NAME 196 PARK PLACE STREET ADDRESS 2.3 STREET ADDRESS JUPITER FL 33458 CITY-ST-ZIP 2. 4 CITY - ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change ☐ Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADORESS 6.3 STREET ADDRESS

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

4/2,/02 56/-743-0509