

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000078203

FILED
Jan 29, 2004
Secretary of State

Entity Name: DOWDLE GAS OF FLORIDA, INC.

Current Principal Place of Business:

2413 HWY 45 N
COLUMBUS, MS 32433

New Principal Place of Business:

Current Mailing Address:

2413 HWY 45 N
COLUMBUS, MS 32433

New Mailing Address:

FEI Number: 06-1638497

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOOD, ALICE
1578 HWY 90 W
DEFUNIAK SPRINGS, FL 32433 US

Name and Address of New Registered Agent:

CHUDY, WENDELL
122 MULRY DRIVE
NICEVILLE, FL 32578 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: WENDELL CHUDY

01/29/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CHUDY, WENDY D
Address: P O BOX 9129
City-St-Zip: COLUMBUS, MS 39705

Title: VP () Delete
Name: DENNIS, GARY
Address: 2413 HWY 45 NORTH
City-St-Zip: COLUMBUS, MS 39705

Title: VP () Delete
Name: CHUDY, WENDELL
Address: 2413 HWY 45 NORTH
City-St-Zip: COLUMBUS, MS 39705

Title: ST () Delete
Name: BOWN, JOHN
Address: 2413 HWY 45 NORTH
City-St-Zip: COLUMBUS, MS 39705

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: ST (X) Change () Addition
Name: BOWEN, JOHN
Address: 2413 HWY 45 NORTH
City-St-Zip: COLUMBUS, MS 39705

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN BOWEN

ST

01/29/2004

Electronic Signature of Signing Officer or Director

Date