2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000046456

Entity Name: FLORIDA LIFT GAS, INC.

FAST, JON A

10654 GRAND RIVIERA

TAMPA, FL 33647

Name:

Address:

City-St-Zip:

FILED Feb 18, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 23835 CORAL RIDGE LN 7105-A EAST 6TH AVENUE LAND O' LAKES, FL 34639 TAMPA, FL 33619 **Current Mailing Address: New Mailing Address:** 6240 STATE RT. 127 NORTH ALTO PASS, IL 62905 FEI Number: 20-0790332 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: F & L CORP ONE INDEPENDENT DRIVE **SUITE 1300** JACKSONVILLE, FL 32202 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PRFS () Delete Title: () Change () Addition RHINE, KENDALL L Name: Name: 6240 STATE RT. 127 NORTH Address: Address: City-St-Zip: ALTO PASS, IL 62905 US City-St-Zip: Title: VΡ Title: () Delete () Change () Addition Name: RHINE. KENDALL T Name: 3622 TREYBYRNE CROSSING Address: Address: DACULA, GA 30019 US City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition RHINE, ANTHONY L Name: Name: 713 BRIANA COURT Address: Address: City-St-Zip: GRAPEVINE, TX 76051 US City-St-Zip: Title: SEC. () Delete Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

Name:

Address:

City-St-Zip:

SIGNATURE: KENDALL L. RHINE PRES 02/18/2009