2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000020487

Entity Name: ALL GAS & MORE, INC.

FILED Apr 30, 2008 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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1375 PIONEER TRAIL UNIT 1666 1111 NORTH DIXIE FREEWAY NEW SMYRNA BEACH, FL 32168 NEW SMYRNA BEACH, FL 32168

Current Mailing Address: New Mailing Address:

P.O. BOX 928 NEW SMYRNA BEACH, FL 32170

FEI Number: 20-4191510 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:

TUCKER, CYRUS TUCKER, CYRUS D V
193 CLUBHOUSE BLVD.
193 CLUBHOUSE BLVD.

NEW SMYRNA BEACH, FL 32168 US NEW SMYRNA BEACH, FL 32168 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: CYRUS TUCKER 04/30/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

Name: FITZGERALD, DONALD Name: FITZGERALD, DONALD R

Address: PO BOX 928 Address: PO BOX 928

City-St-Zip: NEW SMYRNA BEACH, FL 32170 City-St-Zip: NEW SMYRNA BEACH, FL 32170

 $\label{eq:title:V} {\sf Title:} \qquad {\sf V} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf V} \qquad {\sf (X) Change () Addition}$

Name: TUCKER, CYRUS Name: TUCKER, CYRUS D V

Address: PO BOX 928 Address: PO BOX 928

City-St-Zip: NEW SMYRNA BEACH, FL 32170 City-St-Zip: NEW SMYRNA BEACH, FL 32170

 Name:
 TUCKER, ROBERT
 Name:
 TUCKER, ROBERT J S

 Address:
 PO BOX 928
 Address:
 PO BOX 928

City-St-Zip: NEW SMYRNA BEACH, FL 32170 City-St-Zip: NEW SMYRNA BEACH, FL 32170

Title: S (X) Delete Title: () Change () Addition

 Name:
 TUCKER, STANLEY
 Name:

 Address:
 P.O. BOX 928
 Address:

 City-St-Zip:
 NEW SMYRNA BEACH, FL 32170
 City-St-Zip:

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.

SIGNATURE: CYRUS TUCKER V 04/30/2008