

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P29010

Entity Name: ECONO-GAS SUPPLY, INC.

FILED
Feb 16, 2006
Secretary of State

Current Principal Place of Business:

25132 OAKHURST
SUITE 210
SPRING, TX 77386

New Principal Place of Business:

Current Mailing Address:

25132 OAKHURST
SUITE 210
SPRING, TX 77386

New Mailing Address:

FEI Number: 76-0297630

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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:

Title: CEO () Delete
Name: HAVENS, JOE D.,
Address: 25132 OAKHURST DR., #210
City-St-Zip: SPRING, TE

Title: PD () Delete
Name: HAVENS, JAMES A.,
Address: 25132 OAKHURST DR., #210
City-St-Zip: SPRING, TE

Title: ST () Delete
Name: WOLF, KENDRA
Address: 25132 OAKHURST DR., #210
City-St-Zip: SPRING, TE

Title: D (X) Delete
Name: HAVENS, MARGARET L.,
Address: 25132 OAKHURST DRIVE
City-St-Zip: SPRING, TE

Title: V () Delete
Name: JIM TRUCK,
Address: 25132 OAKHURST DR., #210
City-St-Zip: SPRING, TX

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: HAVENS, JOE D.,
Address: 25132 OAKHURST DR., #210
City-St-Zip: SPRING, TE 77386 US

Title: PD (X) Change () Addition
Name: HAVENS, JAMES A.,
Address: 25132 OAKHURST DR., #210
City-St-Zip: SPRING, TE 77386 US

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

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

Title: V (X) Change () Addition
Name: JIM TRUCK,
Address: 25132 OAKHURST DR., #210
City-St-Zip: SPRING, TX 77386 US

I hereby certify that the information supplied with this filing does not qualify for the 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: KENDRA WOLF

S/T

02/16/2006

Electronic Signature of Signing Officer or Director

Date