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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # P30542**

(5)

KING PIPELINE AND UTILITY COMPANY, INC.

Principal Place of Business Mailing Address 1512 EIGHTH AVENUE SOUTH 1512 EIGHTH AVENUE SOUTH NASHVILLE TN 37203-5008 NASHVILLE TN 37203 3. Date Incorporated or Qualified 3a, Date of Last Report 08/09/1990 02/19/1996 4. FEI Number 2. Principa Piace of Business 2a. Mailing Address Applied For 62-1093021 Not Applicable 26 Suite, Apl. #, etc. Suite Apt # etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 **Trust Fund Contribution** Added to Fees Country Ζip 8. This corporation has liability for intangible tax under s. 199.032, Yes 24 25 30 Florida Statutes 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 81 Name 1200 S. PINE ISLAND ROAD 82 Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 83 City Zip Code 11. 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signative, typed or prolograncie of registered agent and bit of applicable. (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13, (96/6) PD Addition DELETE \_\_\_ Change 1.1 TITLE TITLE KING, FORREST H., JR. 1.2 NAME NAME 1512 EIGHTH AVE., SOUTH 1.3 STREET ADDRESS STREET ADDRESS NASHVILLE TN 1.4 CITY-ST-7/P Official Of DELETE Change Addition 2.1 TITLE TIME DRINKARD, J.B. 2.2 NAME NAME 1003 CHURCH ST., #500 STREET ADDRESS 2.3 STREET ADORESS LYNCHBURG VA 2 4 CITY-ST-ZIP City - \$1, 209 DELETE Change Addition 3.1 TITLE 101.6 JAMERSON, WILLIAM E. 3.2 NAME NAME 402 N. CHURCH STREET 3 3 STREET ADDRESS STREET ADDRESS appomattax va 3.4. CITY - ST - ZIP CHY ST-ZP DELETE Change Addition  $I \cdot \Pi \cdot f$ 4.1 TITLE CARTWRIGHT, ANITA NAME 4. 2 NAME 1512 EIGHTH AVE., SOUTH 4.3 STREET ADDRESS STREET AFFIRESS NASHVILLE TN 4.4 CITY-ST-ZIP CITY-ST ZIF DELETE 51 TifuE Change ■ Addition TELL 5.2 NAME NAME STREET ALIDRES! 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP ORY \$1-26 DELETE Change Addition TILE 6 1 7ITLE NAME 62 NAME STREET ADORESS 63 STREET ADDRESS

6.4 DITY-ST-ZIP 14. Ido hereby certify that the information supplied with this filling 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

CHY-SI ZII

615/256-6363

**FILED** 

Feb 27 1997 8:00am

Secretary of State

Daytime Phone #