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

**PROFIT CORPORATION ANNUAL REPORT** 



appears in Block 12 or Block 13 if changed, or on an attachment with an address.

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## 1997

DOCUMENT # P30664

(7)

DOWDLE BUTANE GAS COMPANY, INC.

Principal Plac	e of Busmess	Mailing A	ddress		************			
ATTN: JOHN R. BOWEN P.O. BOX 9129 COLUMBUS MS 39705-9129		P.O. BOX	ATTN: JOHN R. BOWEN P.O. BOX 9129 COLUMBUS MS 39705-9129					
		4				3. Date Incorporated or Qualified 08/22/1990	3a. Date of Last F 01/24/1996	Report
2. Principal P	ace of Business	2a. Mailing Address			<del></del>	4. FEI Number		pplied For
21		26				64-0372952	<del> </del> i	ot Applicable
Suite, Apt #, etc		ļ <sub>1</sub>	Suite, Apt. #. etc.			5. Certificate of Status Desired	11 7 -	Additional
City & State			City & State					equired
23 City & State	r.	28	Siale			Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip	Country	Zip		Countr		8. This corporation has liability for		
24	25	29		30	•	· •	Yes No	1. 199.002,
	9. Name and Address of Curren	t Registered A	lgent			10. Name and Address of New Re	gistered Agent	
	OD, ALICE			61	Name			
	/ 20 & MADDISON AVE.			82	Street Addr	ress (P.O. Box Number is Not Acceptal	ole)	
FRE	EPORT FL 32439			-				
				83	i			
				84	City		FL 85 Zip	Code
11 Pursuant	to the provisions of Sections 607 050	2 and 607 150	8. Florida Statut	les the abov	e-named corn	poration submits this statement for the p	purpose of changing it	te registered
office or r	egistered agent, or both, in the State in familiar with, and accept the obliga	of Florida, Suc	h change was :	authorized b	v the corporat	tion's board of directors. Thereby acce	pt the appointment as	registered
SIGNATURE	Signative typed or printed nurse of registered age	at and the december	u. a 01	E Design		red when reinstating)	DATE	
12.	OFFICERS AND		i.ie: (1957)	13.	јен віднасна гадин	ADDITIONS/CHANGES TO OFFIC		RS IN 12
TITLE	Р		DELETE	1 1 TITLE			☐ Change	Addition
NAME	KOEHLER, JOHN P			1.2 NAME				
STREET ADDRESS	2413 HIGHWAY 45 NORTH			1.3 STREE	T ADDRESS			
C/TY-ST-ZIP	COLUMBUS MS 39705-9129			14 CITY-	ST-ZIP			
TITLE	<b>VP</b>	•	DELETE	2 1 TITLE			Change	Addition
NAME	Franklin, Larry	4		2 2 NAME				
STREET ADDRESS	2413 HIGHWAY 45 NORTH			23STREE	T ADDRESS			
CITY-ST-ZIP	COLUMBUS MS 39705-9129		7-1 651535	2.4 CITY	ST-ZIP			
TITLE	VP	*	DELETE	3.1 TITLE			Change	Addition
NAME	HONNOLL, W. BURDETTE	. Ji		3.2 NAME				
STREET ADDRESS	2413 HIGHWAY 45 NORTH COLUMBUS MS 39705-9129				T ADDRESS			
CITY+ST-ZIP TITLE	ST		DELETE	3.4 CITY - 4.1 TITLE	21-71P		Change	Addition
NAME	BOWEN, JOHN R			4.1 I I I L			Ontarige	
STREET ADDRESS	2413 HIGHWAY 45 NORTH				T ADDRESS			
CITY-ST-ZIP	COLUMBUS MS 39705-9129			4.4 CITY-	1			
TITLE	CD		DELETE	5 1 TITLE	<u> </u>		Change	Addition
NAME	DOWDLE, J. NUTIE			5.2 NAME				
STREET ADDRESS	2413 HIGHWAY 45 NORTH			5.3 STREE	T ADDRESS			
CITY - ST - ZIP	COLUMBUS MS 39705-9129			5.4 CITY-	ST-ZIP			
TITLE	D		DELETE	6 1 TITLE			Change	Addition
NAME	DOWDLE, JOHN N			6 2 NAME				
STREET ADDRESS	2413 HIGHWAY 45 NORTH			6.3 STREE	T ADDRESS			
CITY-ST-ZIP	COLUMBUS MS 39705-9129	al also also a	alana : -2 :	6.4 CITY-		J. O. P. 440 00000 5		
informatio	on indicated on this annual report or s	upolementai ar	nnual report is I	true and acc	urate and that	d in Section 119.07(3)(i), Florida Statute t my signature shall have the same lega	al affact as it made un	der eath: that
Lam an o	fficer or director of the corporation or	the receiver or	trustee empoy	vered to exe	cute this repor	rt as required by Chapter 607, Florida S	Statutes; and that my r	name

John 1500sen

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED** 

Jan 16 1997 8:00am Secretary of State