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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400006635 (4)

GAS PROPERTIES OF DESTIN, INC.

Principal Place of Business Mailing Address 506 HWY 98 E 506 HWY 98 E DESTIN FL 32541 DESTIN FL 32541 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/18/1994 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 59-3221885 Not Applicable 21 26 Suite, Apt. #, 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 Trust Fund Contribution Added to Fees 23 28 Žιρ Zip Country Country This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 25 29 30 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent ABBOTT, STEPHEN J. 506 HWY 98 E 62 Street Address (P.O. Box Number is Not Acceptable) **DESTIN FL 32541** 83

office or ri	to the provisions of Sections 607 0502 a agistered agent, or both, in the State of m familiar with, and accept the obligation	Horida, Such change was a	uthorized by the corpor	rporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered
SIGNATURE.	Sturiature, typiod or printed name of registered agent a	no ut c it annihentile (NOTE	Rugistered Agent signature reg	wired when reinstating) DATE
12.	OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	DELETE	1.1 TITLE	Change Addition
NAME	ABBOTT, STEPHEN J.		1.2 NAME	
STREET ADDRESS	506 HWY 98 E		1.3 STREET ADDRESS	
CITY-ST-ZIP	DESTIN FL		1.4 CITY-ST-ZIP	
TITLE	D	DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	Steiner, James R. J		2.2 NAME	
STREET ADDRESS	506 HWY 98 E		2 3 STREET ADDRESS	
CITY-ST-ZIP	DESTIN FL		2 4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	3 1 TITLE	☐ Change ☐ Addilion
NAME	ANDREWS, ANGUS G. J		32 NAME	
STREET ADDRESS	506 HWY 98 E		3.3 STREET ADDRESS	
CITY-ST-ZIP	Destin Fl		3.4. CITY - ST - ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY - ST - ZIP			4.4 CITY-ST-ZIP	
TITLE		DELETE	5.1 TITLE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS			5 3 STREET ADDRESS	
CITY-\$T-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6 1 TITLE	Change Addition
NAME			62 NAME	Į
STREET ADDRESS			6 3 STREET ADDRESS	
CITY-ST-ZIP			6 4 CITY - ST - ZIP	

14. I hereby certify that the information supplied with this filing 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 this receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed in on an attachment with an address

SIGNATURE:

850 654-4437

FILED

Feb 18 1998 8:00am

Secretary of State