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

PROFIT FLORIDA DEPARTMENT OF STATE FILED CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 98 FEB 18 AM 9: 04 1998 **DOCUMENT #** SECRETARY OF STATE TALLAHASSEE, FLORIDA P95000000578 (1) ATLANTIC GULF UTILITIES, INC. Principal Place of Business Mailing Address 2601 S. BAYSHORE DRIVE 9TH FLOOR 2601 S. BAYSHORE DRIVE 9TH FLOOR MIAMI FL 33133-5461 MIAMI FL 33133-5461 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/04/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Not Applicable 21 26 65-0546743 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional X 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country 8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes 24 25 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GOLDMAN, JOEL K 2601 S. BAYSHORE DRIVE 9TH FLOOR R2 Street Address (P.O. Box Number is Mot Ageonagle 1968 --MIAMI FL 33133-5461 02/20/98 - 01103 - 015 83 ****158.75 ****158.75 84 City Zip Code 85 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** Signature, typod or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change **X** Addition PD TITLE 1.1 TITLE v RUTHERFORD, LARRY J NAME 1.2 NAME Gillette, J Thomas 2601 S. BAYSHORE DRIVE 9TH FLOOR STREET ADDRESS 1.3 STREET ADDRESS 2601 S. Bayshore Drive MIAMI FL 33133-5461 CITY-ST-ZIP 1.4 CITY-ST-ZIP Miami, Florida 33133 DELETE Change TITLE 2.1 TITLE Addition JEFFREY, THOMAS W NAME 2.2 NAME Laguardia, John STREET ADDRESS 2601 S. BAYSHORE DRIVE 9TH FLOOR 2 3 STREET ADDRESS 2601 S. Bayshore Drive CITY-ST-ZIP MIAMI FL 33133-5461 2.4 CITY-ST-ZIP Miami, Florida 33133 DELETE 3.1 TITLE Change X Addition TITLE CARLETON, CALLIS N. NAME 3.2 NAME Cook, Paula STREET ADDRESS 2601 S. BAYSHORE DRIVE 9TH FLOOR 3.3 STREET ADDRESS 2601 S. Bayshore Drive MIAMI FL 3.4. CITY-ST-ZIP Miami. Florida 33133 CITY-ST-ZIP DELETE ☐ Change Addition 4.1 TITLE TITLE VAS LANGLEY, MARCIA H NAME 4.2 NAME 2601 S. BAYSHORE DRIVE 9TH FLOOR 4.3 STREET ADDRESS STREET ADDRESS MIAM! FL CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE 5.1 TITLE Addition TITLE FISCHER, JOHN H NAME 5.2 NAME 2601 S. BAYSHORE DRIVE 9TH FLOOR 5.3 STREET ADDRESS STREET ADDRESS MIAMI FL 33133-5461 CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition VSD 6.1 TITLE TITLE NAME GOLDMAN, JOEL K. 6.2 NAME 2601 S. BAYSHORE DRIVE 9TH FLOOR STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. 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 the 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, or on an attachment with an address.

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