

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000089305

FILED  
Jan 07, 2008  
Secretary of State

Entity Name: SOUTH FLORIDA GAS COMPANY, INC.

**Current Principal Place of Business:**

2483 EVANS AVENUE  
FORT MYERS, FL 33901

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 9351  
FORT MYERS, FL 33902

**New Mailing Address:**

FEI Number: 65-0621834

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

KNOTT, GEORGE H  
1625 HENDRY STREET  
SUITE 301  
FT MYERS, FL 33901 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: PTD ( ) Delete  
Name: ROBB, CHARLES R  
Address: 3705 NE 11TH PL  
City-St-Zip: CAPE CORAL, FL 33909 LE

Title: VSD ( ) Delete  
Name: STOTHERS, RICHARD L  
Address: 2226 NE 35TH ST  
City-St-Zip: CAPE CORAL, FL 33909 LE

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

I hereby certify that the information supplied with this filing does not qualify 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: CHARLES R ROBB

PTD

01/07/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date