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

PROFIT CORPORATION ANNUAL REPORT

1997

CITY-S1-7(P

SIGNATURE:

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



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 11 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000014822 (6)

SOUTHEASTERN GAS, INC.

Principal Place of Business Mailing Address 5056 SE MANATEE TERRACE 5056 SE MANATEE TERRACE STUART FL 34997 STUART FL 34997-2543 3. Date Incorporated or Qualified 3a. Date of Last Report 02/12/1996 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address Not Applicable 26 65-0668510 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing  $\Box$ Trust Fund Contribution Added to Fees 28 23 Country Country Zip 8. This corporation has liability for intangible tax under s. 199.032, Yes No 30 Florida Statutes 29 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name LAVENE, GEORGE W **5056 SE MANATEE TERRACE** 82 Street Address (P.O. Box Number is Not Acceptable) STUART FL 34997 R1 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 (NOTE: Registered Agent signature required when reinstating) Signature, typical or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12 DELETE Change Addition 1.1 TITLE THE LAVENE, GEORGE W 12 NAME NAME Lavene, George W **5056 SE MANATEE TERRACE** 1.3 STREET ADDRESS 5056 SE Manatee Terrace STREET ADORESS STUART FL 34997 1.4 CITY-ST-ZIP Stuart FL 34997 CITY-ST-2# Addition DELETE Change 2.1 TITLE THILE 2.2 NAME NAME Lavene, Whitney G 2.3 STREET ADDRESS STREET ADDRESS 400 North Old Dixie Hwy Jupiter FL 33458 2. 4 CITY-ST-ZIP CITY - ST - ZIP Change DELETE Addition 3.1 TITLE TIFLE 3.2 NAME Lowe, Dolores L NAME 3.3 STREET ADDRESS STREET ADDRESS 5056 SE Manatee Terrace 3.4 CITY-ST-ZIP Stuart FL 34997 CITY-ST-ZIP Change Addition DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CHTY - ST - ZIP Change Addition DELETE 5 1 TITLE THEF **5.2 NAME** NAME **5.3 STREET ADDRESS** STREET ADDRESS 5.4 CITY-ST-ZIP CITY - ST - ZIF Change \_\_\_ Addition DELETE TITLE 6.1 TITLE 62 NAME NAME 63 STREET ADDRESS STREET ADDRESS

64 CiTY+ST-ZiP

14. If do 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