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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

1998 DIVISION OF CORPORATIONS DOCUMENT # D06000034033 (0)

Secretary of State

FILED

Mar 26 1998 8:00am

1. Corporation L. W. (GAS COMPANY, INC.	0004033 (9)			
Principal Place of Business Mailing Address				- I DACINE I IN I	11111 B1901 19196 11168 1111 1 74 1
4643 KINGSPOINT CT LAKELAND FL 33813		4643 KINGSPOINT CT LAKELAND FL 33813		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
				04/22/1996	
2. Principal Place of Business 2a. Mailing Address				4. FEI Number	Applied For
21		26		59-3378743	Not Applicable
Suite, Apt	. W, etc.	Suite, Apt. #, etc.	 	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Sta	te	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country 25	Zip 29	Country 30	This corporation owes or has paid the Personal Property Tax due June 30.	current year Intangible Yes No
	9. Name and Address of Cur			10. Name and Address of New Registers	ed Agent
WIBERT, LEE M 4843 KINGSPOINT CT LAKELAND FL 33813			82 Street Ad 83 84 City	dress (P.O. Box Number is Not Acceptable)	Zip Code
	to the provisions of Sections 607.0 registered agent, or both, in the St am familiar with, and accept the ob	0502 and 607.1508, Florida Statute ate of Florida Such change was a bligations of, Section 607.0505, Flo	es, the above-named co uthorized by the corpor rida Statutes.	rporation submits this statement for the purposation's board of directors. I hereby accept the a	
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable (NOTE	: Registered Agent signature req	uired when reinstating) DATI	
12. OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12	
TITLE	PD	☐ DELETE	1.3 TITLE		☐ Change ☐ Addition
NAME	WIBERT, LEE M		12 NAME		
STREET ADDRESS	4643 KINGSPOINT CT		1.3 STREET ADDRESS		
CITY-ST-ZIP	LAKELAND FL 33813		1.4 CITY-ST-ZIP		
TITLE	VD	DELETE	2.1 TITLE		Change Addition
HAME	WIBERT, ERIC		2.2 NAME		
STREET ADDRESS	2045 E EDGEWOOD DR		2.3 STREET ADDRESS		
CITY-ST-ZIP	LAKELAND FL 33803		2. 4 CITY-ST-ZIP		
Trti F	CTD	DELETE	3 1 Title		Change Addition

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 accreate 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 of the receiver or trusted employeed 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 or an attachment with the requirement of the corporation of the c

3.2 NAME

4.1 TITLE

4. 2 NAME 4.3 STREET ADDRESS

5.1 TITLE

5.2 NAME 5.3 STREET ADORESS

6.1 TITLE

6.2 NAME

DELETE

DELETE

DELETE

3.3 STREET ADDRESS

3.4. CITY-ST-ZIP

4.4 CITY-ST-ZIP

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

TITLE

NAME

WIBERT, KIRK

4643 KINGSPOINT CT

LAKELAND FL 33813

LEE M. WIBERT 3/20/18 9416448924

Change

__ Addition

Addition

Change Addition