PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000053113

FILED Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90082 039 ***150.00

1850 HANNA ROAD 1850 HANNA ROAD 1250 HANNA ROAD 127 R. 3349		SIONAL GAS SERVICES, IN						
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Suite, Apt. #, etc. 22 Suite, Apt. #, etc. 23 City & State City Country City & Country City & Country City & City C						59-3515 189	No	t Applicable
City & State						The Court of	\$8.75 A	dditional
City & State						5. Certificate of Status Desired	Fee Re	quired
Zip Country Zip Country Zip Country R. This corporation were the current year intensible Model to Fees						6. Election Campaign Financing	\$5.00	May Be
Zip Country Zip Signature (Popular Registered Agent) 9. Name and Address of Current Registered Agent WILSON, JAMES W 16509 HANNA ROAD LUTZ FL 33549 22 Street Address (P.O. Box Number is Not Acceptable) 82 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 95 Zip Code 85 Agents (P.O. Box Number is Not Acceptable) 85 Agents (P.O. Box Number is Not Acceptable) 86 Agents (P.O. Box Number is Not Acceptable) 87 Agents (P.O. Box Number is Not Acceptable) 88 Agents (P.O. Box Number is Not Acceptable) 89 Agents (P.O. Box Number is Not Acceptable) 89 Agents (P.O. Box Number is Not Acceptable) 80 Agents (P.O. Box Number is Not Acceptable) 81 Agents (P.O. Box Number is Not Acceptable) 82 Street Address (P.O. Box Number is Not Acceptable) 82 Street Address (P.O. Box Number is Not Acceptable) 83 Agents (P.O. Box Number is Not Acceptable) 84 City FL 95 Zip Code 85 Agents (P.O. Box Number is Not Acceptable) 85 Agents (P.O. Box Number is Not Acceptable) 86 Agents (P.O. Box Number is Not Acceptable) 87 Agents (P.O. Box Number is Not Acceptable) 87 Agents (P.O. Box Number is Not Acceptable) 87 Agents (P.O. Box Number is Not Acceptable) 88 Agents (P.O. Box Number is Not Acceptable) 89 Agents (P.O. Box Number is Not Acceptable) 80 Agents (P.O. Box Number i			28				•	
28					 _	8. This corporation owes the current year		./
9. Name and Address of Current Registered Agent 81 Name 10. Name and Address of New Registered Agent 10. Name and Name 10. Na		25	29 30]				No
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16509 HANNA ROAD LUTZ FL 33549 83 Street Address (P.O. Box Number is Not Acceptable) 83 84 City				81	Name		•	
LUTZ FL 33549 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Floridal Statutes, the above-named corporation submits, this statement for the provisions of Sections 607.0502 and 607.1508. Floridal Statutes, the above-named corporation submits, this statement for the provisions of Sections 607.0505. Floridal Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607.0505, Floridal Statutes. SIGNATURE INTE POPICER AND DIRECTORS 12. NAME HONAKER, ROGER B 12. NAME VILICATION STATE VP DELETE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 15. STREET ADDRESS CITY-ST-ZIP TITLE VP DELETE 11. TITLE VP DELETE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 15. STREET ADDRESS CITY-ST-ZIP TITLE VP DELETE 15. TITLE VP Change Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 16. STREET ADDRESS CITY-ST-ZIP TITLE VP DELETE 17. ST-ZIP TITLE VP DELETE 18. TITLE Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 18. STREET ADDRESS CITY-ST-ZIP TITLE VP DELETE 18. TITLE Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 18. STREET ADDRESS CITY-ST-ZIP TITLE VP DELETE 18. TITLE Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 22. NAME 18. STREET ADDRESS CITY-ST-ZIP TITLE VP DELETE 18. STREET ADDRESS CITY-ST-ZIP TITLE TO DELETE 18. TITLE Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	WILSON, JAMES W					(D O D M		
### City ###	·				Street Add	dress (P.O. Box Number is Not Acceptable)		
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's 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, typed or printed name of registered agent	LUTZ FL 33549				-			
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's 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, typed or printed name of registered agent								
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 charging its 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, 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, 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, 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, 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, or both. in the State of Florida. Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS IN 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 16. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 20. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 21. TITLE 22. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 23. STREET ADDRESS 24. CITY-ST-ZIP 24. CITY-ST-ZIP 25. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 25. TITLE 26. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 26. CITY-ST-ZIP 27. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 28. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 29. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 20. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 20. A					City	F	85 Zip C	Code
TITLE	SIGNATURE	Signature, typed or printed name of registered agen	at and title if applicable. (NOTE: Rec	gistered Age				
HONAKER, ROGER B	12.					ADDITIONS/CHANGES TO OFFICERS		
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TITLE VP	NAME	•		1.2 NAME				
TITLE	STREET ADDRESS			1.3 STREE	T ADDRESS			
NAME WILSON, JAMES W 22 NAME 22 NAME	CITY-ST-ZIP	SEFFNER FL 33584		1.4 CITY-5	ST-ZIP			
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CITY-ST-ZIP	NAME	WILSON, JAMES W		2.2 NAME				
TITLE	STREET ADDRESS	16509 HANNA ROAD		2.3 STREE	T ADDRESS			
NAME	CITY-ST-ZIP	LUTZ FL 33549		2.4 CITY-	ŞT-ZIP			
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THE STATE OF THE PARTY OF THE STATE OF THE S	CITY-ST-ZIP	TAMPA FL 33616		5.4 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 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, with all other like empowered.

6.1 TITLE

6.2 NAME

8.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

□ DELETE

☐ Change

☐ Addition