2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # P98000057156 Jan 22, 2007 08:00 AM **Secretary of State** NEW CENTURY GAS SERVICE, INC. Principal Place of Business Mailing Address 8795 SE MAY TERRACE HOBE SOUND FL 33455 8795 SE MAY TERRACE HOBE SOUND FL 33455 2. Principal Place of Business - No P.O Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & State 4. FEI Numbor Applied For 65-0848777 Not Applicable Zip Country Zıp Country \$8.75 Additional 5. Cortificate of Status Desirod Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Namo NOVOTNEY, CHARLES J Street Address (P.O. Box Number is Not Acceptable) 8795 SE MAY TERRACE HOBE SOUND FL 33455 City Zip Code 8. 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 I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title in applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. unit Change Addition ☐ Delete 1000 NOVOTNEY, CHARLES J NAMI NAMI 8795 SE MAY TERRACE STRUET ADDRESS STREET ADORESS 000000595707 HOBE SOUND FL 33455 CITY-ST-7IP CHY-ST-ZIP /23/07-80049-019 150.00 IIIIE Detete ☐ Change Addition HILL NAMI NAME STEWELLADORESS STREET ADDRESS CHY-ST-ZIP CHY-SI-ZIP TITLE Defete ши Change Addition NAME NAM STREET ADORESS STRUET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete HILL ☐ Change ■ Addition NAM! NAMI STREET ADDRESS STREET ADDRESS CITY-ST-7IP CiTY-S1-ZIP ☐ Change Addition ☐ Delete HITTE NAMI STREET ADDRESS STREET ADDRESS CHY-ST-7IP C11Y-S1-7IP ☐ Change Addition Ittli ☐ Delete 11111 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - S1 - ZIP

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SIGNATURE: Charles O Mundaut - Charles J. Novotney-D 1/19/07 (772) 708-0590

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes 1 further certify that the information indicated on this roport or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.