

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000010524

1. Entity Name

EMERALD COAST GAS PIPING OF NORTHWEST FLORIDA, I

FILED
Apr 25, 2001 8:00 am
Secretary of State

04-25-2001 90059 044 ***150.00

Principal Place of Business

304 REEVES ST. #C21
NICEVILLE FL 32578

Mailing Address

304 REEVES ST. #C21
NICEVILLE FL 32578

2. Principal Place of Business

112 Wise Ave.

Suite, Apt. #, etc.

Unit 5

3. Mailing Address

112 Wise Ave.

Suite, Apt. #, etc.

Unit 5

City & State

Niceville, FL

City & State

Niceville, FL

Zip

32578

Country

Zip

32578

Country

4. FEI Number 59-3553979

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DELBY, CARMON
304 REEVES ST. LOT #C21
NICEVILLE FL 32578

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)
112 Wise Ave.

Unit 5

City
Niceville

FL

Zip Code
32578

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-appointing)

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PVST
NAME DELBY, CARMON
STREET ADDRESS 304 REEVES ST LOT C21
CITY-ST-ZIP NICEVILLE FL 32578 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PVST
NAME Delby, Carmon
STREET ADDRESS 112 Wise Ave. Unit 5
CITY-ST-ZIP Niceville, FL 32578 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Carmon Delby 4-19-01 850-678-2626

Date

Daytime Phone #

CR2E034 (10/00)