

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

COMPAGNIE
ANNUAL REPORT

1995



OFFICE OF THE SECRETARY OF STATE

1000 Bank Building

Tallahassee, Florida

92300-0000

APPROVED
4-30-95

DOCUMENT # S02084

(9)

SEALY 11 APR 1995

KEITH LAWSON PROPANE, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Office Address

P.O. BOX 37309
TALLAHASSEE FL 32315

Mailing Address

P.O. BOX 37309
TALLAHASSEE FL 32315

See Instructions to Filers, Page 1

2. Filing Date of this Report		3a. Date of last Report	
09/25/1990		04/01/1994	
4. Filing Number		Adjusted Fee (Not Applicable)	
59-3033519			
5. Certificate of Status (Required)		\$8.75 Additional Fee Required	
6. Election Campaign Financing (Trust Fund Contribution)		\$5.00 May Be Added to Fees	
7. This corporation is not subject to the provisions of the Florida Statutes, Chapter 219, F.S.		☐ Yes ☒ No	
21. Principal Office Address	22. Mailing Address	23. City & State	
3710 N. Monroe St.	P.O. Box 37309	Tallahassee, FL	
24. 32303	25. U.S.A.	26. 32315	27. U.S.A.

9. Name and Address of Current Registered Agent

LAWSON, KEITH O.
3710 NORTH MONROE ST.
TALLAHASSEE FL 32303

10. Name and Address of New Registered Agent

81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	FL
85. Zip Code	

11. I, the undersigned, being a resident of the State of Florida, do hereby certify that the above named corporation is duly organized under the laws of the State of Florida, and that the undersigned is a duly authorized officer of said corporation, and that the undersigned is duly qualified to act as a registered agent for said corporation, and that the undersigned is duly qualified to act as a registered agent for said corporation, and that the undersigned is duly qualified to act as a registered agent for said corporation.

Signature: X Date: 05/03/95

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
NAME	D. LAWSON, KEITH O. P.O. BOX 37309 TALLAHASSEE FL VI	NAME	
STREET ADDRESS	3710 N MONROE ST TALLAHASSEE FL	STREET ADDRESS	
CITY		CITY	
STATE		STATE	
ZIP CODE		ZIP CODE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY		CITY	
STATE		STATE	
ZIP CODE		ZIP CODE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY		CITY	
STATE		STATE	
ZIP CODE		ZIP CODE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY		CITY	
STATE		STATE	
ZIP CODE		ZIP CODE	

Delete officer -
no longer employed by
Keith Lawson Propane, Inc.

14. I, the undersigned, do hereby certify that the information supplied with this filing is a true and correct statement of the facts as to the organization and status of the corporation, and that the undersigned is a duly authorized officer of said corporation, and that the undersigned is duly qualified to act as a registered agent for said corporation, and that the undersigned is duly qualified to act as a registered agent for said corporation, and that the undersigned is duly qualified to act as a registered agent for said corporation.

SIGNATURE: Keith O. Lawson, Sr.
05/03/95 (904) 562-8880