

SCC eFile

2015 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION

215517697

1.) CORPORATION NAME:

**AmeriGas Propane, Inc.**

DUE DATE: **3/31/2015**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY  
Bank of America Center, 16th Floor  
1111 East Main Street**

SCC ID NO: **F1208489**

**RICHMOND, VA**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	100

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**PA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 460 GULPH ROAD

CITY/ST/ZIP: KING OF PRUSSIA, PA 19406

7.) DIRECTORS AND PRINCIPAL OFFICERS:

All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: JERRY E SHERIDAN  
TITLE: PRESIDENT  
ADDRESS: 460 NORTH GULPH ROAD  
CITY/ST/ZIP/CO: KING OF PRUSSIA, PA 19406

OFFICER

DIRECTOR

NAME: TROY FEE  
TITLE: VP-HUMAN RES  
ADDRESS: 460 NORTH GULPH ROAD  
CITY/ST/ZIP/CO: KING OF PRUSSIA, PA 19406

OFFICER

DIRECTOR

NAME: HUGH J GALLAGHER  
TITLE: VP-FIN/CFO  
ADDRESS: 460 N GULPH ROAD  
CITY/ST/ZIP/CO: KING OF PRUSSIA, PA 19406

OFFICER

DIRECTOR

NAME: HUGH J GALLAGHER  
TITLE: TREASURER  
ADDRESS: 460 NORTH GULPH ROAD  
CITY/ST/ZIP/CO: KING OF PRUSSIA, PA 19406

OFFICER

DIRECTOR

NAME: MICHAEL R PEARSON  
TITLE: ASST TREASURER  
ADDRESS: 460 N GULPH RD  
CITY/ST/ZIP/CO: KNG OF PRUSSIA, PA 19406

OFFICER

DIRECTOR

NAME: MONICA M GAUDIOSI  
TITLE: SECRETARY  
ADDRESS: 460 N GULPH RD  
CITY/ST/ZIP/CO: KING OF PRUSSIA, PA 19406

OFFICER

DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MATTHEW A WOODWARD ASST SECRETARY 460 NORTH GULPH ROAD KING OF PRUSSIA, PA 19406	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN L WALSH VICE CHAIRMAN 460 NORTH GULPH ROAD KING OF PRUSSIA, PA 19406	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LON R GREENBERG CHAIRMAN 460 NORTH GULPH ROAD KING OF PRUSSIA, PA 19406	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	BRIAN R FORD DIRECTOR 460 NORTH GULPH ROAD KING OF PRUSSIA, PA 19406	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	WILLIAM J MARRAZZO DIRECTOR 460 NORTH GULPH ROAD KING OF PRUSSIA, PA 19406	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARVIN O SCHLANGER DIRECTOR 460 NORTH GULPH ROAD KING OF PRUSSIA, PA 19406	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	K. RICHARD TURNER DIRECTOR 460 NORTH GULPH ROAD KING OF PRUSSIA, PA 19406	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ JERRY E SHERIDAN SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	JERRY E SHERIDAN, PRESIDENT PRINTED NAME AND CORPORATE TITLE	5/5/2015 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			