

**2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
May 18, 2005  
Secretary of State**

DOCUMENT# 366037

Entity Name: SAN ANN OIL COMPANY

**Current Principal Place of Business:**

205 S. HOOVER ST.  
TAMPA, FL 33609

**New Principal Place of Business:**

**Current Mailing Address:**

205 S. HOOVER ST.  
TAMPA, FL 33609

**New Mailing Address:**

205 S. HOOVER ST. #400  
TAMPA, FL 33609

FEI Number: 59-1300438      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HUGHEY, MIKE  
205 S. HOOVER ST.  
TAMPA, FL 33609      US

**Name and Address of New Registered Agent:**

WILSON, J STYLES  
205 S. HOOVER ST.  
TAMPA, FL 33609      US

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: J STYLES WILSON      05/18/2005  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: VD ( ) Delete  
Name: FARMER, JD  
Address: 205 S HOOVER ST #400  
City-St-Zip: TAMPA, FL

Title: T ( ) Delete  
Name: THATCHER, CAROLYN  
Address: 205 S HOOVER ST  
City-St-Zip: TAMPA, FL

Title: PD ( ) Delete  
Name: HUGHEY, MIKE,  
Address: 205 S HOOVER ST  
City-St-Zip: TAMPA, FL 00000,

Title: SD (X) Delete  
Name: CARTER, SHIRLEY,  
Address: 205 S. HOOVER ST.  
City-St-Zip: TAMPA, FL

Title: DV (X) Delete  
Name: THATCHER, CAROLYN  
Address: 205 S HOOVER ST, SUITE 400  
City-St-Zip: TAMPA, FL 33609

Title: D (X) Delete  
Name: HUGHEY, EVELYN  
Address: 205 S. HOOVER BLVD. #400  
City-St-Zip: TAMPA, FL 33609

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VD (X) Change ( ) Addition  
Name: FARMER, JD  
Address: 205 S HOOVER ST #400  
City-St-Zip: TAMPA, FL 33609

Title: PTD (X) Change ( ) Addition  
Name: CARTER, SHIRLEY  
Address: 205 S HOOVER ST  
City-St-Zip: TAMPA, FL 33609

Title: VSD (X) Change ( ) Addition  
Name: THATCHER, CAROLYN  
Address: 205 S HOOVER ST #400  
City-St-Zip: TAMPA, FL 33609

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHIRLEY CARTER      PRES      05/18/2005  
Electronic Signature of Signing Officer or Director      Date