

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

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MAY -1 PM 2:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Worthen
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F27683**

(4)

1. Corporation Name

CONTINENTAL SHALE CORPORATION

Principal Place of Business

**494 N HARBOR CITY BLVD
MELBOURNE FL 32935**

Mailing Address

**494 N HARBOR CITY BLVD
MELBOURNE FL 32935**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **03/31/1981** 3a. Date of Last Report **03/24/1994**

4. FEI Number **59-2089459** Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contributions ☐ **\$5.00 May Be Added to Fees**

7. Does corporation intend to file a statement of financial condition with the Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21

2a. Mailing Address

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State, Apt #, etc.

State, Apt #, etc.

City & State

City & State

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**WHITTINGTON, RICHARD A
494 N. HARBOR CITY BLVD
MELBOURNE FL 32935**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office (a registered agent, or both) in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby attest the appointment as registered agent. I am familiar with and accept the provisions of Sections 607.0502 Florida Statutes.

SIGNATURE

Signature of Registered Agent (Type or Print Name)

Signature of Registered Agent (Type or Print Name)

86

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12a	PD
NAME	WHITTINGTON, RICHARD A
STREET ADDRESS	494 N. HARBOR CITY BLVD
CITY, STATE, ZIP	MELBOURNE, FL 00000
12b	AS
NAME	WHITTINGTON, BARBARA C
STREET ADDRESS	494 N. HARBOR CITY BLVD
CITY, STATE, ZIP	MELBOURNE, FL 00000
12c	
NAME	
STREET ADDRESS	
CITY, STATE, ZIP	
12d	
NAME	
STREET ADDRESS	
CITY, STATE, ZIP	
12e	
NAME	
STREET ADDRESS	
CITY, STATE, ZIP	
12f	
NAME	
STREET ADDRESS	
CITY, STATE, ZIP	

13a	☐ Change ☐ Addition
13b	
13c	
13d	
13e	☐ Change ☒ Addition
13f	U.P. Dir.
13g	Richard A. Counts
13h	494 N. Harbor City Blvd.
13i	Melbourne, Fla. 32935
13j	☐ Change ☐ Addition
13k	
13l	
13m	☐ Change ☐ Addition
13n	
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14. I hereby certify that the information supplied with this filing is voluntarily furnished and is true and correct and that my signature shall have the same legal effect as if made under oath. That I am an officer or director of this corporation or the receiver or trustee empowered to make this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report or on an attachment with an address.

SIGNATURE: *Richard A. Whittington, Pres.*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard A. Whittington

4-16-95

407-254-4054