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**PROFIT** Apr 22 1998 8:00am FLORIDA DEPARTMENT FSTATE CORPORATION Sandra B. Morti ANNUAL REPORT Secretary of State Secretary of Stat 1998 DIVISION OF CORPOR TIONS **DOCUMENT #** H05041 (9) FLORIDA PETROLEUM CORPORATION Principal Place of Business Mailing Address 136 EASTPORT ROAD 136 EASTPORT ROAD PO BOX 18247 PO BOX 18247 JACKSONVILLE FL 32229-7247 JACKSONVILLE FL 32229-7247 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/24/1984 2. Principal Place of Business 2a. Mailing Address 4. FEL Number Applied For 26 59-2412672 Not Applicable Suite, Apt #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees ZiD Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Yes Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent HALL, Y.E., JR. 61 Name **136 EASTPORT ROAD** 82 Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE FL 32218 R3 84 City Zip Code 85 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 or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or printed name of registered agent and tire if applicable (NOTE Hingistered Agent signature required when reinstating) 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELFTE TITLE 1.1 TITLE Change Addition SWINSON, GRETCHEN NAME 1.2 NAME 136 E. PORT RD STREET ADDRESS 1.3 STREET ADDRESS JACKSONVILLE FL CITY-S1-ZIP 1.4 CITY-ST-ZIP TITLE DELETE 2.1 TITLE Addition HALL, Y. E., JR. NAME 2 2 NAME 136 E. PORT RD STREET ADDRESS 23 STREET ADDRESS JACKSONVILLE FL CHY-ST-ZIP 2 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition BRYAN, CHRISTINA H. NAME 3.2 NAME 136 E. PORT RD STREET ADDRESS 3.3 STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP 34 CITY-ST-ZIP DELETE TITLE 4.1 TITLE ☐ Change \_\_\_ Addition BRYAN, WILLIAM E JR. NAME 4. 2 NAME 136 EASTPORT ROAD STREET ADDRESS 4.3 STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change Addition HIGGINBOTHAM, RICHARD NAME 5.2 NAME **136 EASTPORT ROAD** STREET ADORESS 5 3 STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP 5 4 CHY-ST-ZIP DELETE TITLE Change ☐ Addition 61 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 14. 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 annual report or supplemental annual 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 trusted emprovered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attraction of the corporation of the co

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