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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

F03916

(6)

DOCUMENT #

1. Corporation Name

OLEUM CORPORATION

OLLOW COM CHANGE						
Principal Place of Business	Mailing Address	1100100				
2600 Golden gate PKWY Suite 200 Naples FL 33942	P.O. BOX 413038 NAPLES FL 33941-3038					
		3. Date Incorporated or Qualified 10/30/1980	3a. Date of Las 05/01/	t Report 1995		
2. Principal Place of Business	2a. Mailing Address	4. FEI Number		Applied For		

NAPLES FL 33942														
	MAPLES PL 30542	71C			3. Date Incorporated or Qualified 10/30/1980			3a. Date of Last Report 05/01/1995						
2.	Principal Place of Busin	1058	28	Mailing Address					Number				Applied For	
21	•		26						59-204001	9			Not Applicable	
22	Suite, Apt. #, etc. 2 City & State		27	Suite, Apt. #, etc. 27 City & State 28			5. Cert	ificate of Statu	s Desired		\$8.75 Additional Fee Required			
23			28									\$5.00 May Be Added to Fees		
24	Zıp	Country 25	29	Zip	30 Co	untry		1	corporation h	as liability for i		ax under	rs 199.032,	
	9. Nam	e and Address of Currer				Ĭ		10. Nar	ne and Addre	ss of New R	egistered	Agent		
COLLIER, BARRON III					81 82		ess (P.O. B	ox Number is	Not Acceptab	le)				
2600 GOLDEN GATE PARKWAY, #200 NAPLES FL 33942-3206				83					······································					
						84	City				FL	Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees e tax under s 199.032,		

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 _	gnature, typed or printed name of registered agent and title if app	AVOTE.	Registered Agent signature required	Luber rejectation) DA					
Signature, typed or printed name of registered agent and title if applicable (NOTE 12. OFFICERS AND DIRECTORS			13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
TILLE	P	DELETE	1. 1 TITLE		☐ Change	☐ Addition			
NAME	COLLIER, BARRON III		1.2 NAME	•					
STREET ADDRESS	2600 GOLDEN GATE PARKWAY		1.3 STREET ADDRESS						
CITY - S1 - 7IP	NAPLES FL		1.4 CITY-ST-ZIP						
THILE	ST	DELETE	2. 1 TITLE		Change	☐ Addition			
NAME	MARINELLI, PAUL J		22 NAME						
STREET ADDRESS	2600 GOLDEN GATE PARKWAY		23 STREET ADDRESS						
CITY - ST - ZIP	NAPLES FL		2.4 CITY-ST-ZIP						
TITLE	D	DELETE	3 1 TITLE		☐ Chançe	Addition			
NAME	GABLE, LAMAR		3.2 NAME						
STREET ADDRESS	2600 GOLDEN GATE PARKWAY		3 3 STREET ADDRESS						
CITY-ST-ZIP	NAPLES FL		3.4 CITY-ST-ZIP						
TITLE	D	DELETE	4. 1 TITLE		Change	☐ Addition			
NAME	VILLERE, FRANCES G		4.2 NAME						
STHEET ADDRESS	2600 GOLDEN GATE PARKWAY		4 3 STREET ADDRESS						
CITY-ST-ZIP	NAPLES FL		4.4 CITY - ST - ZIP						
TOLE	D	DELETE	5. 1 TITL€		Change	Addition			
NAME	DOANE, PHYLLIS G		5.2 NAME						
STREET ADDRESS	2600 GOLDEN GATE PARKWAY		5.3 STREET ADDRESS	600001807	436				
CITY - ST - ZIP	NAPLES FL		5.4 CITY - ST - ZIP	<u>-05/04/9601001-</u>	-803				
TITLE	D	DELETE	6 1 TITLE	***200 . 00	☐ Change	Addition			
NAME	KELLER, DONNA G		6.2 NAME						
STREET ADDRESS	2600 GOLDEN GATE PARKWAY		63 STREET ADDRESS						
0.7 07. 7.0	NAPLES FL		A A CITY - ST - ZIP						

14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 trustee enjowered 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 attachment with an address.

SIGNATURE: __

4/9/96 941/262-2600 Date Proper