### 2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000109462

**Entity Name: NORTH AMERICAN LUBRICANTS COMPANY** 

**FILED** Apr 22, 2021 **Secretary of State** 1973849565CC

## **Current Principal Place of Business:**

7337 E DOUBLETREE RANCH RD

SUITE 180

SCOTTSDALE, AZ 85258

## **Current Mailing Address:**

7337 E DOUBLETREE RANCH RD **SUITE 180** SCOTTSDALE, AZ 85258 US

Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

CT CORPORATION 1200 SOUTH PINE ISLAND RD. PLANTATION, FL 33324 US

FEI Number: 94-3409060

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: CHRISTINE KELM 04/22/2021

Electronic Signature of Registered Agent

Date

### Officer/Director Detail:

**SECRETARY** Title Title DIRECTOR READ, LARRY PASS, CHARLES Name Name

Address 7337 E DOUBLETREE RANCH RD Address 7337 E DOUBLETREE RANCH RD SUITE 180

**SUITE 180** 

SCOTTSDALE AZ 85258 SCOTTSDALE AZ 85258 City-State-Zip: City-State-Zip:

Title TREASURER/CFO Title CEO

PASS, CHARLES READ, LARRY Name Name

7337 E DOUBLETREE RANCH RD 7337 E DOUBLETREE RANCH RD Address Address

SUITE 180 **SUITE 180** 

SCOTTSDALE AZ 85258 City-State-Zip: SCOTTSDALE AZ 85258 City-State-Zip:

Title Title **PRESIDENT DIRECTOR** LEE, RICHARD Name Name READ, AARON

7337 E DOUBLETREE RANCH RD 7337 E DOUBLETREE RANCH RD Address Address

> SUITE 180 **SUITE 180**

SCOTTSDALE AZ 85258 SCOTTSDALE AZ 85258 City-State-Zip: City-State-Zip:

I hereby 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 all other like empowered.