

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 134407

Entity Name: CENTRAL OIL CO INC

FILED
Mar 21, 2006
Secretary of State

Current Principal Place of Business:

CENTRAL OIL CO.
1001 MCCLOSKEY BLVD.
TAMPA, FL 33605 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2826
MOBILE, AL 36652 US

New Mailing Address:

FEI Number: 59-0914530

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: ASD () Delete
Name: BONDURANT, ROBERT D
Address: 4200 STONE RD.
City-St-Zip: KILGORE, TX 75663

Title: PD () Delete
Name: MARTIN, RUBEN S III
Address: 4200 STONE RD.
City-St-Zip: KILGORE, TX 75663

Title: VPD () Delete
Name: NEUMEYER, DONALD R
Address: 4200 STONE RD.
City-St-Zip: KILGORE, TX 75663

Title: STD () Delete
Name: SKELTON, WESLEY
Address: 4200 STONE RD.
City-St-Zip: KILGORE, TX 75663

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 Chapter 119, 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: MARI ODOM

CONT

03/21/2006

Electronic Signature of Signing Officer or Director

Date