

2001 UNIFORM BUSINESS REPORT (UBR)

03-14-2001 90009 007 ***150.00
203759

DOCUMENT # 203759

1. Entity Name

Charter Oil Company

FILED

01 MAR 26 PM 2:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
4655 Salisbury Road
Suite 399
Jacksonville, FL 32256

Mailing Address
4655 Salisbury Road
Suite 399
Jacksonville, FL 32256

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-0824771

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Corporation Service Company
1201 Hays Street
Tallahassee, FL 32301

Name

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

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE VS
NAME Ross, John E.
STREET ADDRESS 4655 Salisbury Road, Suite 399
CITY-ST-ZIP Jacksonville, FL 32256 ☐ Delete

TITLE PD
NAME Briskman, Louis J.
STREET ADDRESS 51 West 52nd Street
CITY-ST-ZIP New York, NY 10019 ☐ Delete

TITLE EVD
NAME Fricklas, Michael D.
STREET ADDRESS 1515 Broadway
CITY-ST-ZIP New York, NY 10036 ☐ Delete

TITLE EVD
NAME Reynolds, Fredric G.
STREET ADDRESS 1515 Broadway
CITY-ST-ZIP New York, NY 10036 ☐ Delete

TITLE SV
NAME Roskin, William A.
STREET ADDRESS 1515 Broadway
CITY-ST-ZIP New York, NY 10036 ☐ Delete

TITLE VController
NAME Davis, James F.
STREET ADDRESS 11 Stanwix Street
CITY-ST-ZIP Pittsburgh, PA 15222 ☐ Delete

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE NAME
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CITY-ST-ZIP ☐ Change ☐ Addition

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TITLE NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 report or supplemental 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

John E. Ross
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John E. Ross

3/7/01

904-281-4488

Date

Daytime Phone #

CR2E034 (11/00)