

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY 16 PM 12:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

900001493269
-05/18/95--01037--011
*****8.75 *****8.75

DOCUMENT # 214578

(7)

1. Corporation Name

GULF ASPHALT CORPORATION

Principal Place of Business

4116 NORTH U.S. HIGHWAY 231
P.O. BOX 2462
PANAMA CITY FL 32404-9235

Mailing Address

4116 NORTH U.S. HIGHWAY 231
P.O. BOX 2462
PANAMA CITY FL 32404-9235

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/13/1958

3a. Date of Last Report

02/10/1994

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

59-0840493

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

HILTON, L. CHARLES JR
4116 NORTH U.S. HIGHWAY 231
PANAMA CITY FL 32401

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is

83

84 City

FL

85 Zip Code

900001493269
-05/18/95--01037--012
*****225.00 *****225.00

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

(Signature: Typed or printed name of registered agent and 15% if applicable)

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	HILTON, L. CHARLES JR
STREET ADDRESS	16709 W HIGHWAY 98
CITY, ST, ZIP	PANAMA CITY FL
TITLE	V
NAME	ATKINSON, CAROL S
STREET ADDRESS	723 HUNTINGDON ROAD
CITY, ST, ZIP	PANAMA CITY FL
TITLE	TS
NAME	ATKINSON, CAROL S
STREET ADDRESS	723 HUNTINGDON ROAD
CITY, ST, ZIP	PANAMA CITY FL
TITLE	V
NAME	DODD, RICHARD
STREET ADDRESS	4116 N. HWY. 231
CITY, ST, ZIP	PANAMA CITY FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	C	☒ Change ☐ Addition
1.2 NAME	Hilton, L. Charles Jr.	
1.3 STREET ADDRESS	4116 N. Highway 231	
1.4 CITY, ST, ZIP	Panama City, Florida 32404	
2.1 TITLE	P	☒ Change ☐ Addition
2.2 NAME	Dodd, Richard M.	
2.3 STREET ADDRESS	4116 N. Highway 231	
2.4 CITY, ST, ZIP	Panama City, Florida 32404	
3.1 TITLE	V	☐ Change ☒ Addition
3.2 NAME	Bense, Allan G.	
3.3 STREET ADDRESS	4116 N. Highway 231	
3.4 CITY, ST, ZIP	Panama City, Florida 32404	
4.1 TITLE	V/TS	☒ Change ☐ Addition
4.2 NAME	Atkinson, Carol S.	
4.3 STREET ADDRESS	4116 N. Highway 231	
4.4 CITY, ST, ZIP	Panama City, Florida 32404	
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY, ST, ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY, ST, ZIP		

14. I do 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)(b), 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 empowered 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:

Carol Atkinson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-10-95

(909)
785-4675

Date

Telephone (Area #)