

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 06, 2002 8:00 am
Secretary of State

03-06-2002 90029 020 ***150.00

0633364 SP

DOCUMENT # 219949

1. Entity Name

GATOR OIL COMPANY

Principal Place of Business

Mailing Address

**1502 S LAKESIDE DR
UNIT 412
LAKE WORTH FL 33460
US**

**PO BOX 3060 1960
BANNER ELK NC 28604
US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

Applied For

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

Not Applicable

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**THOUREEN, O R
1502 S LAKESIDE DR
UNIT 412
LAKE WORTH FL 32460**

Name

Lew A. Halter

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

3003 South Congress Avenue - 2C

City

Palm Springs

FL

Zip Code
33461

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

Lew A. Halter
Signature, typed or printed name of registered agent and use if applicable.

Lew A. HALTER, Pres
(NOTE: Registered Agent signature required when re-registering)

2-14-02
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, 2002 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
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
THOUREEN, O R
1502 S LAKESIDE DR UNIT 412
LAKE WORTH, FL 00000** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PTD
Lew A HALTER
PO Box 1960, 585 Old Farm Rd
BANNER ELK NC 28604** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SVD
HALTER, LEW A
585 OLD FARM RD
BANNER ELK NC 28604** ☒ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**AS
HALTER, JANIE T
585 OLD FARM RD
BANNER ELK NC 28604** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VSD
HALTER, JANIE T
585 OLD FARM Rd
BANNER ELK, NC 28604** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

TITLE
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☐ Change ☐ Addition

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STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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:

Lew A. Halter
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Lew A. HALTER, Pres
Date

2-14-02
Daytime Phone #

CR2E034 (9/01)