

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

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **375461** (1)

1. Corporation Name

CHARTER OIL (INTERNATIONAL), INC.

Principal Place of Business

5700 WILSHIRE BOULEVARD
SUITE 575
LOS ANGELES CA 90036-3659

Mailing Address

5700 WILSHIRE BOULEVARD
SUITE 575
LOS ANGELES CA 90036-3659

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/12/1971

3a. Date of Last Report

08/24/1994

4. FEI Number

94-2139415

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

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

City & State

City & State

23

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

FL

B5 Zip Code

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 title is required)

(Not) Registered Agent signature required when registering

(Date)

12. OFFICERS AND DIRECTORS

TITLE	PTD
NAME	CARSON, THOMAS P
STREET ADDRESS	5700 WILSHIRE BOULEVARD
CITY ST ZIP	LOS ANGELES CA 90036-3659
TITLE	VASD
NAME	HAWKINS, THOMAS W
STREET ADDRESS	200 S ANDREWS AVENUE
CITY ST ZIP	FT LAUDERDALE FL
TITLE	VSD
NAME	ROSS, JOHN E
STREET ADDRESS	4655 SALISBURY ROAD
CITY ST ZIP	JACKSONVILLE FL
TITLE	SV
NAME	FAIRBANKS, GREGORY K
STREET ADDRESS	200 S. ANDREWS AVE
CITY ST ZIP	FT. LAUDERDALE FL 33301-1860
TITLE	VC
NAME	COUGHLAN, KATHLEEN
STREET ADDRESS	5700 WILSHIRE BOULEVARD
CITY ST ZIP	LOS ANGELES CA 90036-3659
TITLE	VAS
NAME	BACHMANN, PETER H
STREET ADDRESS	5700 WILSHIRE BOULEVARD
CITY ST ZIP	LOS ANGELES CA 90036-3659

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	V, Taxes and Finance	☐ Change ☒ Addition
1.2 NAME	Ross G. Landsbaum	
1.3 STREET ADDRESS	5700 Wilshire Boulevard, Ste 575	
1.4 CITY ST ZIP	Los Angeles, CA 90036-3659	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY ST ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY ST ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY ST ZIP		
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 110.07(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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John E. Ross, Vice President

5/12/95

904-281-4488

(Date)

(Telephone Number)