2000 UNIFORM BUSINESS REPORT (UBR) FILED Apr 18, 2000 8:00 am Secretary of State DOCUMENT # 401940 1. Entity Name CARSE OIL COMPANY, INC. 04-18-2000 90245 007 ***150.00 Principal Place of Business Mailing Address S BUMBY AVE 1700 S BUMBY AVE TOT FL 32806 ORLANDO FL 32806-3202 PEACOGA 3. Mailing Address 2. Principal Place of Business Suite Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number City & State 59-1400036 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CARSE, WAYNE L Street Address (P.O. Box Number is Not Acceptable) 1700 S BUMBY AVENUE ORLANDO FL 32806 Zip Code entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. (NOTE. Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. PD Change Addition Delete TITLE CARSE, WAYNE L NAME 1025 SWEETBRIAR ROAD STREET ADORESS ST-ZIP ORLANDO FL CITY-ST-ZIP Change Addition STD Delete TITLE CARSE, JIMMIE L STREET ADDRESS 1025 SWEET BRIAR ROAD CITY-ST-ZIP ST ZIP ORLANDO FL Change ☐ Addition Delete MCINVALE, W. KENNETH NAME 1700 SOUTH BUMBY AVE. STREET ADDRESS ADDRECS ORLANDO FL CITY-ST-ZIP ST-ZIP ☐ Change Addition Delete TITLE NAME STREET ADDRESS ADDRECS CITY-ST-ZIP ST-ZIP Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP ST-ZIP ☐ Change Addition Delete TITLE NAME STREET ADDRESS - 10001.35 CITY-ST-ZIP

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 ent with an address, with all other like empowered.

Wayne L. <u>Carse</u>

April 6, 2000

CR2E034 (9/99)