## 2007 FOR PROFIT CORPORATION

## **ANNUAL REPORT** FILED Feb 12, 2007 08:00 AM DOCUMENT # 401940 1. Entity Name **Secretary of State** CARSE OIL COMPANY, INC. Principal Place of Business Mailing Address 1700 S BUMBY AVE 1700 S BUMBY AVE ORLANDO, FL 32806 ORLANDO, FL 32806 US 02062007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-1400036 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CARSE.WAYNE L DO NOT WRITE 1700 S BUMBY AVENUE ORLANDO, FL 32806 IN THIS SPACE 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title it applicable. (NOTE: Registered Agent algorature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS PD TITLE CARSE WAYNE L U00000632583 02/21/07-80027-025 150.00 STREET ADDRESS 1025 SWEETBRIAR ROAD CITY-ST-ZIP ORLANDO, FL STD TITLE CARSE, JIMMIE L NAME STREET ADDRESS 1025 SWEET BRIAR ROAD CITY-ST-ZIP ORLANDO, FL TITLE NAME KIRBY, PHYLLIS B STREET ADDRESS 1700 SOUTH BUMBY AVE. DO NOT WRITE CITY-ST-ZIP ORLANDO, FL 32806 IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP

Wayne L. Carse

2/6/07

407-898-9494