

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

*Ag. 1872*

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **465208** (7)

1. Corporation Name  
**PETRO CHEMICAL PRODUCTS, INC.**



Principal Place of Business: **2910 W. BEAVER STREET JACKSONVILLE FL 32254 US**  
Mailing Address: **100 NW 12TH AVENUE C/O TAX DEPARTMENT DEERFIELD BEACH FL 33442 US**

3. Date Incorporated or Qualified: **11/19/1974**  
3a. Date of Last Report: **05/01/1995**  
4. FEI Number: **59-1562245**  
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 (21-24) and 2a. Mailing Address (25-30) fields with sub-headers for Suite, City & State, Zip, and Country.

**9. Name and Address of Current Registered Agent**

**10. Name and Address of New Registered Agent**

**CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324**

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
85 Zip Code: **FL**

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: \_\_\_\_\_ (NOTE: Registered Agent sign in request when mandating) \_\_\_\_\_ DATE: \_\_\_\_\_

**12. OFFICERS AND DIRECTORS**

TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>MORAN, JAMES, M</b>	
STREET ADDRESS	<b>100 NW 12TH AVENUE</b>	
CITY - ST - ZIP	<b>DEERFIELD BEACH FL</b>	
TITLE	<b>P</b>	<input checked="" type="checkbox"/> DELETE
NAME	<b>GUNNELL, CASEY L.</b>	
STREET ADDRESS	<b>100 NW 12TH AVE.</b>	
CITY - ST - ZIP	<b>DEERFIELD BCH FL</b>	
TITLE	<b>P</b>	<input type="checkbox"/> DELETE
NAME	<b>GIVENS, WAYNE</b>	
STREET ADDRESS	<b>2910 W. BEAVER STREET</b>	
CITY - ST - ZIP	<b>JACKSONVILLE FL</b>	
TITLE	<b>DVAS</b>	<input type="checkbox"/> DELETE
NAME	<b>MORAN, PATRICIA, G</b>	
STREET ADDRESS	<b>100 NW 12TH AVE</b>	
CITY - ST - ZIP	<b>DEERFIELD BEACH FL</b>	
TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>MORAN, JANICE M.</b>	
STREET ADDRESS	<b>100 NW 12TH AVE</b>	
CITY - ST - ZIP	<b>DEERFIELD BEACH FL</b>	
TITLE	<b>TAS</b>	<input type="checkbox"/> DELETE
NAME	<b>RICH, LAWRENCE, S</b>	
STREET ADDRESS	<b>100 NW 12TH AVE</b>	
CITY - ST - ZIP	<b>DEERFIELD BEACH FL</b>	

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	<i>See attached list</i>
13 STREET ADDRESS	
14 CITY - ST - ZIP	
21 TITLE	
22 NAME	
23 STREET ADDRESS	
24 CITY - ST - ZIP	
31 TITLE	
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	
62 NAME	
63 STREET ADDRESS	
64 CITY - ST - ZIP	

00000175500 Change  
-03/25/96--01020--007  
\*\*\*200.00

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)(k), 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: *John J. White* Secretary *3/21/96* (954) 429-2010  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Deposite Phone #

CR2E034 (12/95)

492.2 82

Rev. 3/14/96

**PETRO CHEMICAL PRODUCTS, INC.  
LIST OF OFFICERS AND DIRECTORS**

TITLE  
NAME  
ADDRESS  
CITY, STATE ZIP CODE

D  
MORAN, JAMES M.  
100 N.W. 12TH AVE.  
DEERFIELD BEACH, FL 33442

TITLE  
NAME  
ADDRESS  
CITY, STATE ZIP CODE

D  
MORAN, JANICE M.  
100 N.W. 12TH AVE.  
DEERFIELD BEACH, FL 33442

TITLE  
NAME  
ADDRESS  
CITY, STATE ZIP CODE

D/V/AS/T  
MORAN, PATRICIA G.  
100 N.W. 12TH AVE.  
DEERFIELD BEACH, FL 33442

TITLE  
NAME  
ADDRESS  
CITY, STATE ZIP CODE

P  
GIVENS, WAYNE  
2910 W. BEAVER ST.  
JACKSONVILLE, FL 33442

TITLE  
NAME  
ADDRESS  
CITY, STATE ZIP CODE

EV/GC  
BROWN, COLIN  
100 N.W. 12TH AVE.  
DEERFIELD BEACH, FL 33442

TITLE  
NAME  
ADDRESS  
CITY, STATE ZIP CODE

S  
WHELAN, JOHN J.  
100 N.W. 12TH AVE.  
DEERFIELD BEACH, FL 33442

TITLE  
NAME  
ADDRESS  
CITY, STATE ZIP CODE

V  
ARNETT, ROBERT  
8040 BAYBERRY ROAD  
JACKSONVILLE, FL 32256

TITLE  
NAME  
ADDRESS  
CITY, STATE ZIP CODE

T/AS  
RICH, LAWRENCE S.  
100 N.W. 12TH AVE.  
DEERFIELD BEACH, FL 33442