

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 538788

FILED
Feb 07, 2008
Secretary of State

Entity Name: HOWELL OIL COMPANY

Current Principal Place of Business:

808 N.W. 12TH STREET
P.O. BOX 430
BELLE GLADE, FL 33430

New Principal Place of Business:

808 N.W. 12TH STREET
BELLE GLADE, FL 33430

Current Mailing Address:

808 N.W. 12TH STREET
P.O. BOX 430
BELLE GLADE, FL 33430

New Mailing Address:

FEI Number: 59-1760816 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOWELL, CHRISTINE E
407 E AVENIDA DEL RIO
CLEWISTON, FL 33440 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: HOWELL, GREG
Address: 140 W DEL MONTE
City-St-Zip: CLEWISTON FL, 33440

Title: PD () Delete
Name: HOWELL, CHRISTINE
Address: 407 E AVENIDA DEL RIO
City-St-Zip: CLEWISTON FL, 33440

Title: ST () Delete
Name: HOWELL, KEITH
Address: 904 BANYAN STREET
City-St-Zip: CLEWISTON, FL 33440

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LINDSEY HOWELL

OM

02/07/2008

Electronic Signature of Signing Officer or Director

Date