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	TICE: CORPORATION WILL BE D E ON OR BEFORE 09/30/98: \$550 (IF DISS			B.			
COR ANNU	PROFIT PORATION JAL REPORT 1998-99	Sandra B. Secretary			ED		
DOCU	MACNIT #		99 APR -2 AH11: 24				
1. Corporatio	OIL COMPANY, INC.	(5)		SEIGHE I VALL AHADS	ELL STATE EL FLORIDA		
Childs	OIL COMPAINT, INC.			F IORIAN BANK BINDI TAKA BANJA MBATI HIDI BI	AN BIBN BIBN BIBN BIBN BIBN 1881		
Principal Plac	e of Business E Highway 17	Mailing Address					
ARCADIA FL-86	<del>17 NOMH</del> フ 1 <del>821</del>	P.O. BOX 1417 ARCADIA FL 33821		RENSTATEMEN DO NOT WRITE IN T	HIS SPACE		
]	43 u b	34265		3. Date Incorporated or Qualified			
	lace of Business	2a. Mailing Address		<b>09/19/1977 4.</b> FEI Number	Applied For		
21 3461 Suite, Apt.	N.E. Highway 17	Suite, Apt #, etc		<b>59-1760642 5.</b> Certificate of Status Desired	Not Applicable \$8.75 Additional		
22 City & Stat	<u> </u>	City & State		6. Election Campa go Financing	Fee Required \$5.00 May Be		
23		28	Country	Trust Fund Contribution	Added to Fees		
24 34 2 1	Country  25  9. Name and Address of Current		Country 30	This corporation owes or has paid the Personal Property Tax due June 30     Name and Address of New Register	Yes No		
	IAN, JOHN A.			lartha Childs-Hoc			
	) second street ie 903		3	ress (P.O. Box Number is Not Acceptable) 115 SE Montgome	y Circle		
SAR	ASOTA FL 33821		83	J			
84 City Arcadia FL 85 710 Code 34266							
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. Thereby accept the appointment as registered agent. I apr facilitar with, and accept the obligations-pf, section 607.0505, Florida Statutes.							
SIGNATURE	Signature, typed or pricing name of registered agent.	ACQUEU and the if applicable (NO)	E. Registered Agent siyi afore req	uned when roinstatings 3/3 OAT	199		
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS			
NAME	CHILDS-HOOVER, MARTHA	<del>-</del>	1.2 NAME		L. J. Clange J. Orldition		
STREET ADDRESS CITY-ST-ZiP	3115 S.E.MONTGOMERY CIRCLI ARCADIA FL	34366	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		34766		
TITLE	VD VD	DELETE	2 1 TITLE		34366 Change 🗸 Addition		
NAME STREET ADDRESS	HOOVER, PAUL 3115 SE MONTEGOMERY CIR		2.2 NAME 2.3 STREET ADDRESS				
CITY-ST-ZIP	ARCADIA FL		2.4 CITY-\$1-ZIP		34266		
TITLE	STD	DELETE	3 1 TITLE		34266 Change (7) Addition		
STREET ADDRESS	CHILDS, MARTHA 3115 S.E. MONTOGOMERY CIRC	CLF.	3.2 NAME 3.3 STREET ADDRESS				
CITY-ST-ZIP	ARCADIA FL		3.4 CITY-\$T-ZIP		_34266		
TITLE NAME		[] DELETE	4.1 TITLE 4.2 NAMS.		Change Addition		
\$TREET ADDRESS			4.3 STREET ADDRESS	5,48,80,86,80,82,76,83	12/4/12: (.)		
CITY-ST ZIP			4.4 CITY-ST ZIP	- 04702730	Charles The Addition		
TITLE		L] DELETE	5.1 TOLE 5.2 NAME	· · · · · · · · · · · · · · · · · · ·	Crienge L. Addition		
STREET ADDRESS			53 STREET ADDRESS				
CITY-ST-ZIP			5.4 CiTY-ST-Z-P				
TITLE		[_] DELETE	61 TITLE 62 NAME		Change L Addition		
NAME STREET ADDRESS :			63 STREET ADDRESS				
CITY-ST-ZIP			64 CHY-ST-Z-P				
14. 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 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: 1 Martin Child - House 3/17/99 941.494.2605							