2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)

581010 DOCUMENT #

1. Entity Name

FIVE C'S FUEL DOCK, INC.



FILED Feb 10, 2003 8:00 am Secretary of State

02-10-2003 90447 005 ***150.00

NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CULMER, GENE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP	
Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State Country S. Certificate of Status Desired S8.75 Addition Fee Required 6. Name and Address of Current Registered Agent Name Culmer, GENE City State C	AT TOOK
City & State Country Country Country S. Certificate of Status Desired \$8.75 Addition Fee Required Fee Required Fee Required Fee Required Name CULMER, GENE 1021 11TH STREET, OCEAN MARATHON FL 33050 City FL Zip Code Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code 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 the obligations of registered agent. Signature FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN THE NAME CULMER, GENE 1250 OCEANVIEW AVE MARATHON FL 33050-0637 Delete ITILE NAME CULMER, EUGENE J Delete TITLE NAME CULMER, EUGENE J CHange Change Change Change Change Country Country Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) FL Zip Code Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code Street Address (P.O. Box Number is Not Acceptable) Date Title Number CULMER, GENE 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN TITLE Number CULMER, EUGENE J Change Change	
Zip Country Zip Country 5. Certificate of Status Desired \$8.75 Addition Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CULMER, GENE 1021 11TH STREET, OCEAN MARATHON FL 33050 City FL Zip Code 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 the obligations of registered agent. Signature. Typed or printed name of registered agent and tide if applicable (NOTE: Registered Agent signature required when reinstating) POST NAME POST CULMER, GENE 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN THE CULMER, GENE NAME NAME POST CULMER, GENE 1250 OCEANVIEW AVE MARATHON FL 33050-0637 Delete NAME CITY-ST-ZIP Delete NAME CULMER, EUGENE J Delete Country 5. Certificate of Status Desired \$8.75 Addition Fee Required 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code 1. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN THE NAME STREET ADDRESS CITY-ST-ZIP MAME DVP CULMER, EUGENE J NAME	
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: