

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 PM 1:32

DOCUMENT # 672154

(2)

1. Corporation Name

WIDMAIER OIL CO., INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

644 CARSWELL AVE.
HOLLY HILL FL 32117

Mailing Address

644 CARSWELL AVE.
HOLLY HILL FL 32117

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 06/03/1980	3a. Date of Last Report 02/21/1994
4. FEI Number 59-2005526	Applied For Not Applicable
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. Suite, Apt. #, etc. 22. City & State 23. Zip 24. Country	2a. Mailing Address 26. Suite, Apt. #, etc. 27. City & State 28. Zip 29. Country
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9. Name and Address of Current Registered Agent

PALMETTO CHARTER SER INC
150 MAGNOLIA AVENUE
DAYTONA BEACH FL 32014

10. Name and Address of New Registered Agent

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

Random Burnett
501 W. Grandview Ave.
Daytona Beach, FL 32118

11. Pursuant to the provisions of Sections 607.0503 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 607.0508, Florida Statutes.

SIGNATURE

Signature of, typed or printed name of registered agent and fee applicable

NOTE: Registered Agent signature required when resigning

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1. TITLE	2. NAME
NAME	STREET ADDRESS	12 NAME	13 STREET ADDRESS
CITY - ST - ZIP	CITY - ST - ZIP	14 CITY - ST - ZIP	15 CITY - ST - ZIP
TITLE	NAME	21 TITLE	22 NAME
NAME	STREET ADDRESS	23 STREET ADDRESS	24 CITY - ST - ZIP
CITY - ST - ZIP	CITY - ST - ZIP	31 TITLE	32 NAME
TITLE	NAME	33 STREET ADDRESS	34 CITY - ST - ZIP
NAME	STREET ADDRESS	41 TITLE	42 NAME
CITY - ST - ZIP	CITY - ST - ZIP	43 STREET ADDRESS	44 CITY - ST - ZIP
TITLE	NAME	51 TITLE	52 NAME
NAME	STREET ADDRESS	53 STREET ADDRESS	54 CITY - ST - ZIP
CITY - ST - ZIP	CITY - ST - ZIP	61 TITLE	62 NAME
TITLE	NAME	63 STREET ADDRESS	64 CITY - ST - ZIP
NAME	STREET ADDRESS		
CITY - ST - ZIP	CITY - ST - ZIP		

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 the 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

Charles W. Widmaier Sr.
Widmaier Sr. 4.8.95 904.255-4130

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature Number