SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: $550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $750.)

APPROVED AND FILED
97 NOV 17 AM 9:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # 677054 (9)

1. Corporation Name
ANDERSON PETROLEUM PRODUCTS, INC.

REINSTATEMENT 97
DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
P.O. BOX 3525 PORT CHARLOTTE FL 33949	P.O. BOX 3525 PORT CHARLOTTE FL 33949

3. Date Incorporated or Qualified: 06/28/1980
3a. Date of Last Report: 01/29/1996
4. FEI Number: 59-2002752 ☐ 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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26 3871 TAMIAMI TRAIL
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27 SUITE A
City & State 23	City & State 28 PORT CHARLOTTE, FL
Zip 24 / Country 25	Zip 29 33952 / Country 30 USA

9. Name and Address of Current Registered Agent

WIDMEYER, STEPHAN B
3417-F TAMIAMI TRAIL
PT CHARLOTTE FL 33952

10. Name and Address of New Registered Agent

81 Name: WIDMEYER STEPHAN B.
82 Street Address (P.O. Box Number is Not Acceptable): 3871 A TAMIAMI TR.
83
84 City: PORT CHARLOTTE FL 85 Zip Code: 33952

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: Stephan B. Widmeyer (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent's signature required when reinstating) DATE: 11-12-97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PST	☐ DELETE	1.1 TITLE
NAME	ANDERSON, CHARLES		1.2 NAME
STREET ADDRESS	3278 CONWAY BLVD.		1.3 STREET ADDRESS
CITY-ST-ZIP	PT CHARLOTTE FL		1.4 CITY-ST-ZIP
TITLE	VP	☒ DELETE	2.1 TITLE
NAME	ANDERSON, NANCY SIMES		2.2 NAME
STREET ADDRESS	1508 ROBIN ROAD		2.3 STREET ADDRESS
CITY-ST-ZIP	COATESVILLE PA		2.4 CITY-ST-ZIP
TITLE		☐ DELETE	3.1 TITLE
NAME			3.2 NAME
STREET ADDRESS			3.3 STREET ADDRESS
CITY-ST-ZIP			3.4 CITY-ST-ZIP
TITLE		☐ DELETE	4.1 TITLE
NAME			4.2 NAME
STREET ADDRESS			4.3 STREET ADDRESS
CITY-ST-ZIP			4.4 CITY-ST-ZIP
TITLE		☐ DELETE	5.1 TITLE
NAME			5.2 NAME
STREET ADDRESS			5.3 STREET ADDRESS
CITY-ST-ZIP			5.4 CITY-ST-ZIP
TITLE		☐ DELETE	6.1 TITLE
NAME			6.2 NAME
STREET ADDRESS			6.3 STREET ADDRESS
CITY-ST-ZIP			6.4 CITY-ST-ZIP

☐ Change ☒ Addition
P.O. BOX 8174 VA
FREDERICKSBURG, VA 22404

☐ Change ☐ Addition
500002353315--6
-11/20/97--01091--009
****758.75 ****758.75

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14/19

☐ Change ☐ Addition

14. I do 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: [illegible] 11-12-97

CR2E034 (4/97)