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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 698677

(2)

BAY COAST PETROLEUM, INC.

Principal Place of Business

Mailing Address

FILED Apr 25 1997 8:00am Secretary of State

|--|

| 1202B W 19TH ST PANAM CITY FL 32405 | 1202B W 19TH ST PANAMA CITY FL 32405- | 4104 | | | | |
|---|--|---------------------------|-------------------------|---|--------------------------------|--|
| US | US | | | 3. Date Incorporated or Qualified | | of Last Report |
| | | | | 08/12/1981 | 02/0 | 7/1996 |
| 2. Principal Place of Business 21 /202-B. W. 19 TM ST. | 2a. Mailing Address | I IOTH | <u>-</u> | 4. FEI Number | | Applied For |
| | 26 1202-B, W | 1. /9 = . | DT | 59-2116132 | | Not Applicable |
| Suite, Apt. #, etc. | Suite, Apt. #. ctč. | | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required | |
| City & State | | | | 6. Election Campaign Financing | | \$5.00 May Be |
| 23 PANAMA CITY, FL | 28 PANAMA (| MY, F | _ | Trust Fund Contribution | | Added to Fees |
| Zio Country | Zip | Country | | 8. This corporation has liability for in | ntangible ta | x under s. 199.032, |
| 25 VI J. II. | 29 32105 | 30 U.S | 5.A. | Florida Statutes | Yes 🔲 | No |
| 9, Name and Address of Current I | Registered Agent | | | 10. Name and Address of New Reg | istered Ag | ent |
| JELKS, ALLEN N., JR. | | 81 | Name | | | |
| 239 E FOURTH ST. | | 82 | Stroot Add | ress (P.O. Box Number is Not Acceptable | <u>د)</u> | |
| PANAMA CITY FL 32401 | | 02 | Sircer Addi | ress (F.O. BOX NORIDE) is NOT Acceptable | C) | |
| PANAMA OILT FL 32401 | | 83 | | | | |
| | | 1_1_ | | | | |
| | | 84 | City | | FI | 85 Zip Code |
| 11. Pursuant to the provisions of Sections 607 0502 office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligation | Florida, Such change was | authorized by ti | amed corr ie corpora | poration submits this statement for the pition's board of directors. I hereby accep | urpose of cl t the appoir | nanging its registered nament as registered |
| SIGNATURE Signature, typod or printed name of registered agont. | rusi title di acceleratale (NO) | L. Registered Agent | Skonature regui | irod when reinstar no) | DATE | |
| 12. OFFICERS AND | | 13. | | ADDITIONS/CHANGES TO OFFIC | ERS AND D | DIRECTORS IN 12 |
| TITLE PSD | DELEJE | 1.1 Tillut | | PSD | 5 | Change Addition |
| NAME STERN, HELEN A. | | 1.2 NAME | | STERN HELEN A. | - | |
| STREET ADDRESS 6642 SANDRA RD. | | 13 STHEET AT | notee | JEOSE INTE CT. | | |
| | | | 211 | LYNN HAVEN, FL 32 | 444 | |
| CITY-ST-ZIP PANAMA CITY FL 32409 | DELETE | 1.4 CITY-ST- 2.1 TITLE | 715 | | | Change Addition |
| ¥1D | L. Dettere | | | VTD LOOP D | 4 | S Onlarige Yttotoon |
| NAME STERN, ROB D | | 2.2 NAME | | STERN, ROB D. | | |
| STREET ADDRESS 215 BIRDIE LANE | | 2.3 STREET AU | DRESS | 1503 E. 14TH CT. | 2444 | |
| DITY-ST-ZIP PANAMA CITY FL | Driere | 2. 4 CITY - S1 - | ZIP | LYNN HAVEN, FL 3 | <u> </u> | Totalian Dadwin |
| TITLE | ☐ DELETE | 3.1 THLE | } | • | _ | _ Change Addition |
| NAME | | 3.2 NAME | | | | |
| STREET ADDRESS | | 3.3 STREET AL | DRESS | | | |
| CITY-ST-ZIP | | 34 CITY-S1- | ZIP | | | |
| TITLE | DELETE | 4.1 TillE | | | L | Change |
| NAME | | 4. 2 NAME | l | | | |
| STREET ADDRESS | | 4.3 STREET AT | DRESS | | | |
| CITY-ST-ZIP | | 4.4 CITY - ST - | ZIP | | | |
| TITLE | ☐ DELETE | 5.1 1/3LF | | | | Change Addition |
| NAME | | 5.2 NAME | l | | | |
| STREET ADDRESS | | 5.3 STREET AS | DRESS | | | |
| CITY-ST-ZIP | | 5.4 QHY-ST- | | | | \ |
| TITLE | DELETE | 6.1 TITLE | | | | Change Addition |
| NAME | _ | 62 NAME | | | | * |
| STREET ADDRESS | | 63 STREET AL | 22150 | | | |
| | | 64 CITY-ST- | | | | |
| CITY-ST-ZIP 14. I do hereby certify that the information supplied | with this films does not aus! | | | d in Section 119 07(3)(i) Florida Statutos | L further o | orlify that the |

Information indicated on this annual report or suppliemental 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.

004.7/9.5845