

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 714006

FILED
Jan 29, 2003
Secretary of State

Entity Name: FLORIDA PETROLEUM MARKETERS AND CONVENIENCE STORE ASSOCIATION, INC.

Current Principal Place of Business:

209 OFFICE PLAZA
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

209 OFFICE PLAZA
TALLAHASSEE, FL 32301

New Mailing Address:

FEI Number: 59-0595784

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, JAMES E
209 OFFICE PLAZA DR
TALLAHASSEE, FL 32301

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SMITH, JAMES E
Address: 209 OFFICE PLAZQA
City-St-Zip: TALLAHASSEE, FL 32301

Title: D () Delete
Name: MCKNIGHT, BILL
Address: P O BOX 1110
City-St-Zip: BRANDON, FL 33509

Title: TS () Delete
Name: DENISE, GRIMSLEY
Address: P O BOX 728
City-St-Zip: WAUCHULA, FL 33873

Title: D () Delete
Name: THOMAS, DAVID
Address: P O BOX 5006
City-St-Zip: GAINESVILLE, FL 32627

Title: D () Delete
Name: MANN, HAROLD
Address: 2200 E DUVAL STREET
City-St-Zip: LAKE CITY, FL 320554158

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: MANN, HAROLD
Address: 2200 E. DUVAL STREET
City-St-Zip: LAKE CITY, FL 32055

Title: TS (X) Change () Addition
Name: BERNER, CARL
Address: 440 E. HAITI AVENUE
City-St-Zip: CLEWISTON, FL 33440

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: GRIMSLEY, DENISE
Address: 515 S. 6TH AVE.
City-St-Zip: WAUCHULA, FL 33873

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARL BERNER

TS

01/29/2003

Electronic Signature of Signing Officer or Director

Date