

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 29, 2001 8:00 am
Secretary of State

06-29-2001 90004 043 ***550.00

DOCUMENT # 836938

1. Entity Name

CAMP OIL COMPANY

Principal Place of Business

Mailing Address

**800 NORTH BROAD ST
 SUITE 200
 ROME GA 30161
 US**

**P.O. BOX 100210
 ROME GA 30162-7210
 US**

2. Principal Place of Business

1824 HILLDALE ROAD

3. Mailing Address

1824 HILLDALE ROAD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

DURHAM NC

City & State

DURHAM NC

Zip

27705

Country

USA

Zip

27705

Country

USA

4. FEI Number

58-0647788

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
 1200 S. PINE ISLAND ROAD
 PLANTATION FL 33324**

Name

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☒ Delete
 NAME **NEWTON, DON**
 STREET ADDRESS **800 N BROAD ST**
 CITY-ST-ZIP **ROME GA 30161**

TITLE **PD** ☐ Change ☒ Addition
 NAME **CLAY W. HAMNER**
 STREET ADDRESS **1824 HILLDALE ROAD**
 CITY-ST-ZIP **DURHAM NC 27705**

TITLE **P** ☒ Delete
 NAME **CAMP, ELIZABETH W.**
 STREET ADDRESS **800 N BROAD ST**
 CITY-ST-ZIP **ROME GA 30161**

TITLE **STD** ☐ Change ☒ Addition
 NAME **FRANK J. PROTO**
 STREET ADDRESS **1824 HILLDALE ROAD**
 CITY-ST-ZIP **DURHAM NC 27705**

TITLE **S** ☒ Delete
 NAME **FINCHER, ROSEMARY**
 STREET ADDRESS **800 N BROAD ST**
 CITY-ST-ZIP **ROME GA**

TITLE **PRESIDENT** ☐ Change ☒ Addition
 NAME **P. D. RODEN**
 STREET ADDRESS **1824 HILLDALE ROAD**
 CITY-ST-ZIP **DURHAM NC 27705**

TITLE **VP** ☒ Delete
 NAME **CARROLL, ROBERT**
 STREET ADDRESS **800 N BROAD ST**
 CITY-ST-ZIP **ROME GA**

TITLE **SECRETARY/TREASURER** ☐ Change ☒ Addition
 NAME **STEVEN HAFT**
 STREET ADDRESS **1824 HILLDALE ROAD**
 CITY-ST-ZIP **DURHAM NC 27705**

TITLE **PD** ☐ Delete
 NAME **WAYNE M. ROGERS**
 STREET ADDRESS **11828 LA GRANGE AVENUE**
 CITY-ST-ZIP **LOS ANGELES CA 90025**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/19/01

Date

919-384-9888

Daytime Phone #

CR2E034 (10/00)