

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 25, 2008 08:00 AM
Secretary of State

DOCUMENT # 847322 1. Entity Name COUGAR OIL, INC.	
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Principal Place of Business 1411 WATER AVE PO BOX 1800 SELMA, AL 36702-1800	Mailing Address 1411 WATER AVE PO BOX 1800 SELMA, AL 36702-1800
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DO NOT WRITE IN THIS SPACE

03272008 No Chg-P CR2E034 (11/05)

4. FEI Number 63-0596053	Applied For Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

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

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IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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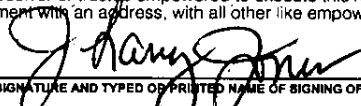
10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	JONES, J. LARRY
STREET ADDRESS	1411 WATER AVENUE
CITY-ST-ZIP	SELMA, AL
TITLE	STD
NAME	JONES, REX M.
STREET ADDRESS	1411 WATER AVENUE
CITY-ST-ZIP	SELMA, AL
TITLE	VD
NAME	JONES, W.L., JR.
STREET ADDRESS	1411 WATER AVENUE
CITY-ST-ZIP	SELMA, AL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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05/16/08-80032-021-158.75

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **J. LARRY JONES** 04/23/08 334 875 2023
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #