2002 UNIFORM BUSINESS REPORT (UBR)

FILED May 14, 2002 8:00 am Secretary of State **DOCUMENT #** F01000001974 1. Entity Name 05-14-2002 90302 013 ***150.00 MARTIN GAS MARINE, INC. Principal Place of Business Mailing Address PO BOX 191 PO BOX 191 KILGORE TX 75663 KILGORE TX 75663 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 75-2242637 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD **PLANTATION FL 33324** City 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME MARTIN III, RUBEN S NAME STREET ADDRESS 4200 STONE RD STREET ADDRESS CITY-ST-ZIP KILGORE TX CITY-ST-ZIP TITLE Delete TITLE ☐ Addition ☐ Change NAME NEUMEYER, DONALD R NAME STREET ADDRESS STREET ADDRESS 4200 STONE RD CITY-ST-ZIP KILGORE TX CITY-ST-7IP TITLE? NAME SKELTON, WESLEY M NAME STREET ADDRESS STREET ADDRESS 4200 STONE RD CITY-ST-ZIP KILGORE TX CITY-ST-ZIP ASSISTANT SECRETARY TITLE ☐ Delete TITLE ☐ Addition Change NAME NAME ROBERT D. BONDURANT STREET ADDRESS STREET ADDRESS 4200 STONE ROAD CITY-ST-ZIE CITY-ST-ZIP KILCORE, TX 75662 TITLE ☐ Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filling 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.

NAME

STREET ADDRESS

Bondurant

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

REQUIREDD. SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

903-983-6200