

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F96000002118

1. Entity Name

WYNN OIL COMPANY

**FILED**  
**Apr 26, 2000 8:00 am**  
**Secretary of State**

04-26-2000 90071 002 \*\*\*150.00

Principal Place of Business

1050 W 5TH ST  
AZUSA CA 91702

Mailing Address

500 N. ST ATE COLLEGE  
700  
ORANGE CA 92868  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

95-1517407

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

THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE FL 32301

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, 2000 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 DC ☐ Delete  
NAME CARROLL, JAMES  
STREET ADDRESS 104 HARTMANN DR  
CITY-ST-ZIP LEBANON TN 37087

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

TITLE DP ☐ Delete  
NAME HUBER, JOHN W  
STREET ADDRESS 500 N STATE COLLEGE BLVD., #700  
CITY-ST-ZIP ORANGE CA 92868

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

TITLE DVS ☐ Delete  
NAME GIBBONS, GREGG M  
STREET ADDRESS 500 N STATE COLLEGE BLVD #700  
CITY-ST-ZIP ORANGE CA 92868

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

TITLE V ☐ Delete  
NAME SCHLOSSER, SEYMOUR  
STREET ADDRESS 500 N STATE COLLEGE BLVD #700  
CITY-ST-ZIP ORANGE CA 92868

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

TITLE V ☐ Delete  
NAME DICOSTANTO, DONALD J  
STREET ADDRESS 1050 W 5TH STREET  
CITY-ST-ZIP AZUSA CA 91702

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE S ☐ Change ☒ Addition  
NAME Wendy K. Peterson  
STREET ADDRESS 500 N. STATE COLLEGE BLVD. #700  
CITY-ST-ZIP ORANGE CA 92868

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

Date

Daytime Phone #

Seymour A. Schlosser 4/21/00 (714) 938-3700

CR2E034 (9/99)