

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F97000003636

1. Entity Name

LAKE CHARLES NAVAL STORES CO., INC.

FILED
Jul 12, 2000 8:00 am
Secretary of State

07-12-2000 90146 016 ***550.00

Principal Place of Business

830 UNION ST
 STE 200
 NEW ORLEANS LA 70112

Mailing Address

830 UNION ST
 STE 200
 NEW ORLEANS LA 70112

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

72-0233720

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

CAPITAL CONNECTION, INC.
 417 E. VIRGINIA ST.
 STE. 1
 TALLAHASSEE FL 32301-1283

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 CP ☐ Delete
 NAME WHITE, JOHN F
 STREET ADDRESS 203 CARONDELET ST, SUITE 710
 CITY-ST-ZIP NEW ORLEANS LA 70130-3016

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

TITLE VCV ☐ Delete
 NAME WHITE, H. HUNTER JR
 STREET ADDRESS 826 UNION ST, SUITE 100
 CITY-ST-ZIP NEW ORLEANS LA 70112

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

TITLE SD ☐ Delete
 NAME PHILLIPS, NATHANIEL P. JR
 STREET ADDRESS 826 UNION ST, SUITE 100
 CITY-ST-ZIP NEW ORLEANS LA 70112

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

TITLE TD ☐ Delete
 NAME KELLEHER, HARRY B JR
 STREET ADDRESS 2121 AIRLINE HWY, SUITE 301
 CITY-ST-ZIP METAIRIE LA 70001

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

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

7-1-00

Date

504-524-8602

Daytime Phone #

CR2E034 (5/00)