## 2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

## Jan 31, 2005 8:00 am Secretary of State **DOCUMENT # F99000001864** 01-31-2005 90081 031 \*\*\*150.00 SAND DOLLAR OIL, INCORPORATED Mailing Address Principal Place of Business 7641 CAMDEN HARBOUR DRIVE 7641 CAMDEN HARBOUR DRIVE 50008370 BRADENTON, FL 34212 BRADENTON, FL 34212 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01272005 Chg-P CR2E034 (10/03) City & State 4. FEI Number Applied For City & State 48-0901327 Not Applicable Country Country Zip \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent MILLER-W-L MILLER, W L Street Address (P.O. Box Number is Not Acceptable) 7641 CAM DEN HARBOUR 19970 CHAPEL TRACE ESTERO; FL -33928-Zip Code 34212 BRADEN TON 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. W. J. Wille (NOTE: Registered Agent signature required when renstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. PTD ☐ Delete TITLE Change : TITLE MILLER, W.L. MILLER, W L NAME NAME DRIVE HARBOUR 7641 CAMDEN -19979 CHAPEL TRACE STREET ADDRESS STREET ADORESS 34212 CITY-ST-7/P ESTERO, FL 33929 CITY-ST-7IP BRADENTON , Delete TITLE MILLER ROBERTA K. 7641 CAMDEN HARBOUR DRIVE MILLER, ROBERTA K NAME 19970 CHAPEL TRACE STREET ADORESS STREET ADDRESS CITY-ST-ZIP ESTERO, FL. 33928 CITY-ST-ZP BRADENTON, FL 34212 VD ☐ Change TITLE Delete TITLE ☐ Addition DECK, DEBORAH NAME NAME STREET ADDRESS 18 ROCHELLE STREET ADDRESS CITY-ST-ZIP NEWPORT COAST, CA 92657 CTTY-ST-ZIP ☐ Delete TITLE ☐ Change ■ Addition TITLE DECK GLENN NAME NAME STREET ADDRESS 18 ROCHELLE STREET ADDRESS CITY-ST-ZIP NEWPORT COAST, CA 92657 CITY-ST-ZIP CD TITI F ☐ Delete TITLE ☐ Addition BUCKINGHAM , JOHN BUCKINGHAM, JOHN NAME NAME GLEN DR 5613 MEADOW STREET ADDRESS STREET ADDRESS 4318-SCOTTSBURY CIR KNOXVILLE, TN CITY-ST-ZIP KNOXVILLE, TN-37919-CITY-ST-ZIP Change Addition TITLE □ Defete TITLE BUCKINGHAM , KATHRYN BUCKINGHAM, KATHRYN NAME NAME 5613 MEADOW STREET ADDRESS 1318 SCOTTSBURRY CIR STREET ADDRESS KNOXVILLE, TN 37919-CITY-ST-ZIP KNOXVILLE, TN 37919 CITY-ST-ZIP 12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**FILED**