

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H05041

FILED  
Mar 23, 2009  
Secretary of State

Entity Name: FLORIDA PETROLEUM CORPORATION

## Current Principal Place of Business:

231 NORTH FRONT STREET  
FERNANDINA BEACH, FL 32035

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 26329  
JACKSONVILLE, FL 32226

## New Mailing Address:

FEI Number: 59-2412672

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HALL, Y.E., JR.  
136 EASTPORT ROAD  
JACKSONVILLE, FL 32218 US

## Name and Address of New Registered Agent:

HALL, Y.E., JR.  
59 PONTE VEDRA BLVD  
PONTE VEDRA BEACH, FL 32082-131 US

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:

03/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VP ( ) Delete  
Name: CONNER, LAGREE  
Address: 231 NORTH FRONT STREET  
City-St-Zip: FERNANDINA BEACH, FL 32035

Title: PD ( ) Delete  
Name: HALL, Y.E. JR.  
Address: 136 EASTPORT ROAD  
City-St-Zip: JACKSONVILLE, FL 32218

Title: VPST ( ) Delete  
Name: WILSON, THOMAS E  
Address: 136 EASTPORT ROAD  
City-St-Zip: JACKSONVILLE, FL 32218

Title: VP ( ) Delete  
Name: HIGGINBOTHAM, RICHARD  
Address: 136 EASTPORT ROAD  
City-St-Zip: JACKSONVILLE, FL 32218

Title: D ( ) Delete  
Name: SWINSON, GRETCHEN  
Address: 136 EASTPORT ROAD  
City-St-Zip: JACKSONVILLE, FL 32218

Title: D ( ) Delete  
Name: BRYAN, CHRISTINA H  
Address: 136 EASTPORT ROAD  
City-St-Zip: JACKSONVILLE, FL 32218

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS E. WILSON

VPST

03/23/2009

Electronic Signature of Signing Officer or Director

Date