

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K60286

1. Entity Name

ST. JOHNS OIL COMPANY 601

FILED
Jun 05, 2000 8:00 am
Secretary of State

06-05-2000 90027 050 ***558.75

Principal Place of Business

Mailing Address

42 SLEEPY HOLLOW RD
PO BOX 8
DOCTORS INLET FL 32030

42 SLEEPY HOLLOW RD
PO BOX 8
DOCTORS INLET FL 32030-0008

2. Principal Place of Business

3. Mailing Address

42 Hollow Road

P. O. Box 8

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Middleburg, FL

City & State

Doctors Inlet, FL

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

Zip

Country

Zip

Country

32068

USA

32030

USA

5. Certificate of Status Desired

XX

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SMITH HUSLEY, & BUSEY
225 WATER ST
STE 1800
JACKSONVILLE FL 32202

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 DP ☐ Delete
NAME ASHBY, GEORGE H
STREET ADDRESS P.O. BOX 8, N/A
CITY-ST-ZIP DOCTORS INLET FL

TITLE C/P ☒ Change ☐ Addition
NAME Ashby, George H., Jr.
STREET ADDRESS 42 Sleepy Hollow Road
CITY-ST-ZIP Middleburg, FL 32068

TITLE VPST ☒ Delete
NAME PETER, EYRICK
STREET ADDRESS P.O. BOX 8, N/A
CITY-ST-ZIP DOCTORS INLET FL

TITLE V ☐ Change ☒ Addition
NAME LaMont, Charles A.
STREET ADDRESS 42 Sleepy Hollow Road
CITY-ST-ZIP Middleburg, FL 32068

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V ☐ Change ☒ Addition
NAME Coogan, Clark
STREET ADDRESS 42 Sleepy Hollow Road
CITY-ST-ZIP Middleburg, FL 32068

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S ☐ Change ☒ Addition
NAME Alfred, Alicia
STREET ADDRESS 42 Sleepy Hollow Road
CITY-ST-ZIP Middleburg, FL 32068

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

CONTACT: CLARK COOGAN

George H. Ashby, Jr.

2/1/00

(904) 272-9548

Date

Daytime Phone #

CR2E034 (9/99)