

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# K60286

FILED  
Apr 27, 2003  
Secretary of State

Entity Name: ST. JOHNS OIL COMPANY

## Current Principal Place of Business:

42 SLEEPY HOLLOW RD  
MIDDLEBURG, FL 32068

## New Principal Place of Business:

## Current Mailing Address:

42 SLEEPY HOLLOW RD  
MIDDLEBURG, FL 32068 US

## New Mailing Address:

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BLACKBURN, DENNIS L  
5150 BELFORT RD S  
BLG 500  
JACKSONVILLE, FL 32256 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: C/P ( ) Delete  
Name: ASHBY, GEORGE H JR  
Address: 42 SLEEPY HOLLOW RD  
City-St-Zip: MIDDLEBURG, FL 32068 US

Title: V ( ) Delete  
Name: LAMONT, CHARLES A  
Address: 42 SLEEPY HOLLOW RD  
City-St-Zip: MIDDLEBURG, FL 32068 US

Title: V/T ( ) Delete  
Name: HAMRICK, RICHARD G  
Address: 42 SLEEPY HOLLOW RD  
City-St-Zip: MIDDLEBURG, FL 32068 US

Title: S (X) Delete  
Name: ALFRED, ALICIA  
Address: 42 SLEEPY HOLLOW RD  
City-St-Zip: MIDDLEBURG, FL 32068 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: T (X) Change ( ) Addition  
Name: DIXON, DEBRA L  
Address: 42 SLEEPY HOLLOW ROAD  
City-St-Zip: MIDDLEBURG, FL 32068 US

Title: S (X) Change ( ) Addition  
Name: ALFRED, ALICIA F  
Address: 42 SLEEPY HOLLOW ROAD  
City-St-Zip: MIDDLEBURG, FL 32068 US

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ALICIA F. ALFRED, SECRETARY

S

04/27/2003

Electronic Signature of Signing Officer or Director

Date