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May 02 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L10589

(4)

1. Corporation Name

PINELLAS FUEL OIL CORPORATION

Principal Place of Business

1165 ELDRIDGE ST
CLEARWATER FL 34615
US

Mailing Address

1165 ELDRIDGE ST
CLEARWATER FL 34615-4310
US



3. Date Incorporated or Qualified

08/22/1989

3a. Date of Last Report

05/01/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

4. FEI Number

59-2976744

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes



Yes No

9. Name and Address of Current Registered Agent

BLAESER, JOHN A
1165 ELDRIDGE ST
CLEARWATER FL 34615

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DV
NAME BLAESER, JAMES A.
STREET ADDRESS 1165 ELDRIDGE ST
CITY- ST- ZIP CLEARWATER FL

DELETE

TITLE VST
NAME DEVINE, DAVID
STREET ADDRESS 1165 ELDRIDGE ST
CITY- ST- ZIP CLEARWATER FL

DELETE

TITLE P
NAME BLAESER, JOHN A
STREET ADDRESS 1165 ELDRIDGE ST
CITY- ST- ZIP CLEARWATER FL

DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE V
1.2 NAME BLAESER, JAMES A.
1.3 STREET ADDRESS 1165 ELDRIDGE ST
1.4 CITY- ST- ZIP CLEARWATER FL 34615

Change

Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY- ST- ZIP

Change

Addition

3.1 TITLE PD
3.2 NAME BLAESER, JOHN A.
3.3 STREET ADDRESS 1165 ELDRIDGE ST
3.4 CITY- ST- ZIP CLEARWATER FL 34615

Change

Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP

Change

Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP

Change

Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY- ST- ZIP

Change

Addition

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

John Blaeser
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John Blaeser

4/21/97
Date

813/461-6194
Daytime Phone #

CR2E034 (9/96)