FILED

2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachm

NATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DI

SIGNATURE:

Feb 20, 2001 8:00 am **DOCUMENT # M11000 Secretary of State** 1. Entity Name NATIONAL OIL AND GAS DISTRIBUTORS, INC. 02-20-2001 90059 049 ***150.00 Principal Place of Business Mailing Address 1976 82ND AVE 1976 82ND AVE VERO BEACH FL 32966 VERO BEACH FL 32966 624952 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2491823 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name COLLINS, GEORGE G JR Street Address (P.O. Box Number is Not Acceptable) 756 BEACHLAND BLVD VERO BEACH FL 32963 City 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) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. TITLE CFO ☐ Delete CEO Change ☐ Addition THORNE, F L NAME NAME THORNE, F L. STREET ADDRESS STREET ADDRESS 1101 INDIAN MOUND TRAIL 5845 CLUB HOUSE DRIVE CITY-ST-ZIP CITY-ST-ZIP VERO BEACH FL VERO BEACH FL-32967 -TITLE ☐ Delete TITLE ☐ Change Addition WRIGHT, CRAIG NAME NAME STREET ADDRESS STREET ADDRESS **1976 82ND AVENUE** CITY-ST-ZIP CITY-ST-7tP VERO BEACH FL 32966 ☐ Addition ☐ Delete Change COPELAND, PATRICK NAME NAME STREET ADDRESS STREET ADDRESS 1320 POITRAS DRIVE CITY-ST-ZIP CITY-ST-ZIP VERO BEACH FL 32963 Change TITLE ☐ Delete ☐ Addition TITLE WALKER, GAYLE NAME NAME STREET ADDRESS STREET ADDRESS 1976 82ND AVENUE CITY-ST-ZIP CITY-ST-ZIP VERO BEACH FL 32966 TITLE ☐ Delete ☐ Change ☐ Addition TITLE NAME HARVELL, RAY NAME STREET ADDRESS STREET ADDRESS 234 SAND PINE ROAD CITY-ST-ZIE CITY-ST-ZIP INDIALANTIC FL TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS 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 of truesee employeered to executigithis report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if the property of the corporation or the receiver of the corporation.