FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

SIGNATURE:

DOCUMENT # M65452

1. Corporation Name

(8)

NATIONAL PETROLEUM PROPERTIES, INC.					
Principal Place	of Business	Mailing Address		a redriden int Aufer frint flatt first	rande dantas danter dinter bildit Arbei bildit finst
299 NINTH STREET N 2343 WEST BAY ISLE		DR., S E			
ST PETERSBURG FL 33731 STE 118 US ST PETERSBURG			00306		
US		ST PETERSBURG FL US	33705	3. Date Incorporated or Qualified	3a. Date of Last Report
				01/22/1988	05/16/1995
2. Principal Pla		2a. Mailing Address		4. FEI Number	Applied For
21 500 / Suite Apt #	BRITTANY DRIVE S.	26		59-2864916	Not Applicable
22 #	3	Suite, Apt. #, etc.		5. Certificate of Status Desired	See Required
City & State		City & State		6. Election Campaign Financing	
23 ST. F	TERSBURG /C	28		Trust Fund Contribution	Added to Fees
7(P 72 -7	Country د	Zip	Country	8. This corporation has liability for	
24 33.	15 PINGUAS	29	30	Florida Statutes	
	g. Name and Address of Curren	t Registered Agent	B1 Name	10. Name and Address of New F	legistered Agent
ACEC M	AVNE		B1 Name		
AGEE, WAYNE 2343 WEST BAY ISLE DR., S E			82 Street Ad	dress (P.O. Box Number is Not Acceptab	ole)
STE 118	SI DAI ISLE DA., S E		83		
	RSBURG FL 33705				
01.1612			84 City		FL 85 Zip Code
or registere familiar with SIGNATURE	of the provisions of Sections 607,0502 diagont, or both, in the State of Floric and accept the obligations of, Section, and accept the obligations of, Sections of the section of the s	ta. Such change was authorion 607.0505, Florida Statute	ized by the comoration's ho	oration submits this statement for the pur and of directors. I hereby accept the app	ointment as registered agent. I am
12,	OFFICERS AND	· · · · · · · · · · · · · · · · · · ·	13.	ADDITIONS/CHANGES TO OFF	DATE ICERS AND DIRECTORS IN 12
TOLE	CPT	☐ DELFTE	1. 1 TOTLE	ADDITIONO/OFFACED TO OFF	Change Addition
NAME	agee, wayne		1.2 NAME		
STREET ADDRESS	2343 WEST BAY ISLE DR., S E		1.3 STREET ADDRESS		
CITY ST ZIP	ST. PETERSBURG FL		1.4 CiTY-ST-ZIP		
TILF		DELETE	2 1 TITLE		Change Addition
NAME Carried Appropries			2 2 NAME *		
STREET ADDRESS CHY ST-ZIP			2.3 STREET ADDRESS		
TITLE		☐ DELETE	2.4 CITY - ST - ZIP 3 1 TITLE		Change Addition
NAME			3 2 NAME		_ susuite _ recover
STHEFT ADDRESS			3.3 STREET ADDRESS		
CHY-SI-ZIP			3.4 CITY-ST-ZIP		
THTLE		☐ DEFELE	4. 1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CHY-S1-ZIP		C Delete	4.4 CITY-ST-ZIP		
TIPLE NAME		☐ DELETE	5. 1 TITLE		Change Addition
STREET ADDRESS			5.2 NAME		
CITY-S'-ZIP			5.3 STREET ADDRESS 5.4 CITY - ST - ZIP		
TILE		DELETE	6 1 TITLE		☐ Change ☐ Addition
NAME			6 2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
C(TY+S!+7)r*			64 CITY - ST - ZIP		
14. I do hereby	certify that the information supplied	An this filing is voluntarily fur	rnished and does not qualify	for the exemption stated in Section 119.	07(3)(k), Florida Statutes. I further
oath; that I appears in	am an officer or director of the corpor Block 12 or Block 13 if changed, or o	ration or the receiver or trust in an attachment with an add	ee empowered to execute the discourse of the second of the	rate and that my signature shall have the his report as required by Chapter 607, Fi	same legal effect as it made under orida Statutes; and that my name

TUPE AND TYPED ON PRINTED NAME OF SIGNING OFFICER ON DIRECTOR Date Destrict Proce I