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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

SIGNATURE:

DOCUMENT # N93000002857 (1)

PETROLEUM INDUSTRY ASSOCIATION OF FLORIDA, INC.

PETRUL	EOM INDUSTRI ASSOCIATION OF FEOTION, INC.			
Principal Place of	Business Vailing Address	11. 1 A.	A C.	inite markt matte timet ichter mittet imm. imm.
,	PO BOX 6746 991	rneat va	L.D	
480 SO. EDGEV JACKSONVILLE	WOOD AVE PLOTO STATE JACKSONMILLE FL 82296 67	46 BUY B	rege, 50 32361	
140	US-	U	3. Date Incorporated or Qualified	3a. Date of Last Report
-			06/25/1993	04/27/1995
	e of Rusiness 2a. Mailing Address		4. FEI Number	Applied For
2. Principal Place	" Shop + Oak Dr 26 991 Dreak	FOAL D	18-0224189	Not Applicable
21 99/	0 11 4 14 14		5 O VS Av of Chatrie Desired	\$8.75 Additional
Suite, Apt. #,	etc. 27	•	5. Certificate of Status Desired	Fee Required
22 Cita & State	Otal & State 1	31	6. Election Campaign Financing	55.00 May Be
	Burn Il 28 July Ores	e, the	Trust Fund Contribution	Added to Fees
23 200	Country Zip 22/1	Cotantry /	8. This corporation has liability for in	tangible tax under s. 199.032.
Z4 325	61 25 Septa Rexa 29 32561 30	Sarta 10.		Yes No
24 000	9. Name and Address of Current Registered Agent		10. Name and Address of New Re	distered Agent
		81 Name	Jula Koluri	<i>S</i>
<u>خناکندن</u> ین	at Robert SiR Paula Roberts	82 Stroot Ac	dress (P.O. Box Number is Not Acceptable	a) ()
RUNEWART, ROBERT S JR Paula Roberts 82 Street Addings (Pt.) Box Number is Not Acceptable (Pt.) Paula Roberts 991 Great Oak Drive 83				
	SSEE PL 32308 Gulf Breeze, FL 32			•
IALLANA	GOEF IL 32300 GUIL BIEEZE, IL 32	84 City/ /	11 0	85 Zp Code
l C		1 1 2 1 1	ill sieze	FL 32361
Pursuant to	the provisions of Sections 617.0502 and 617.1508, Florida Statutes, to death, or both, in the State of Florida, Such change was authorized by and accept the obligations of Section 17.0503, Florida Statutes.	he above named com	portion submits this setement for the purp	oose of changing its registered office introduct as registered agent. I am
or registere	ed agent, of both, in the State of Florida, Such change was authorized by	by the corporation s be	pard of directors. Thereby accept the dipto	
. /	h and according districts of because 1700 to 1701			\$108496
SIGNATURE _	Signature, typed or printed name of registerection from their applicable (NOTE F	Registered Agent signature req	uired when reinstahing) 05/06/96 010	してもがにいする。
12.	OFFICERS AND DIRECTORS	13.	ADDITION OF THE ADDES TO OFF	CERS AND DIRECTORS IN 12 Change KAddition
TITLE	D XX ELEIE	1.1 TIFLE	President	Change Examinan
NAME	GILES, WILLIAM R	12 NAME	Peter Ward	
STREET ADDRESS	3626 PHEONIX AVE		1750 Hill Avenue _	- 00107
CITY-ST-ZIP	JACKSONVILLE FL		<u>West Palm Beach, F</u>	L 33407
TITLE	ST XXPELETE	21 TITLE	Vice President	Change XXAddition
NAME	FRANKLIN, BEN T JR	2.2 NAME	Ben Franklin	
STREET ADDRESS	480 SO. EDGEWOOD AVENUE	2 3 STREET ADDRESS	480 South Edgewood	Avenue
CITY-ST-ZIP	JACKSONVILLE FL	2 4 CITY-ST-ZIP	Jacksonville,FL 3	2205
TITLE	D XXVELETE	31 TITLE	Secretary	☐ Change ★ Addition
NAME	ADAMS, ANDREW J	3.2 NAME	Joseph Cheek	
STREET ADDRESS	84449 43RD STREET N.	3 3 STREET ADDRESS	4409 North Hesperi	des Street
CITY-ST-ZIP	PINELLAS PAR EL	3.4 CITY-\$1-ZIP	Tampa, FL 33614-7	Change Addition
TITLE	D XXOELETE	4 1 TITLE	Director	List Change 2 particulation
NAME	QUINN, RICHARD A	4. 2 NAME	James A. Wynne, II	I
STREET ADDRESS	4225 DAUBERT STREET	43 STREET ADDRESS	_4001 SW 47th Aven	ue
CITY-ST-ZIP	ORLANDO FL	4.4 CITY - ST - ZIP	Ft. Lauderdale, FL	
TITLE	V XXOELETE	51 TITLE	Director	Change PAddition
NAME	WARD, PETER H	5.2 NAME	Maurice Hubbard	
STREET ADDRESS	1750 HILL AVENUE	5 3 STREET ADDRESS	12065 Metro Parkwa	у
CITY-ST-ZIP	WEST PAIM BEACH FL	5 4 City - ST - ZIP	Ft. Lauderdale, Fl	33329
TITLE	P XXOELETE	6 1 TITLE	Director	. ما م
NAME	WOOD, DON	62 NAME	Andrew Adams 8440 43rd Street 1	5/196
STREET ADDRESS	6501 OLD WINTER GARDEN RD	6.3 STREET ADDRESS	8440 43rd Street]	North AND
		6 4 CITY-ST-ZIP	Pinellas Park, FL	34665 UV
14 I do here!	ORLANDO FL by certify that the information supplied with this filing is voluntarily furnis	hed and does not qua	alify for the exemption stated in Section 119	9.07(3)(k), Florida Statutes. I further e same legal effect as if made under

Liuo nereby certify that the information supplied with this niting is voluntarily turnished and does not quality for the exemption stated in declined and statutes, 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE OR DIRECTOR

Ren Franklin, Vice President

Daytime Phone #