## **2001 UNIFORM BUSINESS REPORT (UBR)**

1. Entity Nar	MENT # P00000 s creek oil, inc.	0050308				Sep 17, 2 Secreta 09-17-2001	ry of	f Sta	ate
Principal Place of Business Mailing Address 40702 26TH ST. WEST 40702 26TH ST. WEST BRADENTON FL 34207 BRADENTON FL 34207						A 188 IIBai iji obiik bairi besi boli	<b>71</b> ()  <b>48</b> ( <b>8</b> ) <b>3</b> (8)	1 <b>33188</b> 11119	88581 1 <b>0</b> 15 1885
2. Principal Place of Business 4702 24th St. W.  Suite, Apt. #, etc.  3. Mailing Address 4702 26th St. W. Suite, Apt. #, etc.				St. W.		DO NOT WRITE IN THIS SPACE			
City & Sta	enton, FL	City & State BRACENTON Zip	). FL	· · · · · · · · · · · · · · · · · · ·		FEI Number 65 · 1024364			pplied For ot Applicable
706PE		34219		STAY	ح.	Certificate of Status Desired	_	e Require	
~ . <del></del>	6. Name and Address of Current R	egistered Agent		Name		Name and Address of New Re	gistered Ag	ent	<u>-</u>
BARTLETT, CHARLES J 2033 MAIN ST., SUITE 600 SARASOTA FL 34237				Street Ad	e Will	A P. AVERY  BOX Number is Not Acceptable  DERIVESS BLUC	W·	Zin Cod	
				<u> </u>	RRISK		FL	Zig Cod	<u>ီ၊ 9</u>
Tax filing	Signature, typed or printed name of registered agent agoration is eligible to satisfy its Intangible requirement and elects to do so.	FILE NOW!  After September 12  Make Check Payab	!! FEE IS , 2001 Fe	\$550.0 e will be	\$750.00	10. Election Campaign Fina Trust Fund Contribution		\$5.0	0 May Be
11.	OFFICERS AND D	IRECTORS	12.		Αſ	DDITIONS/CHANGES TO OFFI	CERS AND D	IRECTOR:	S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D AVERY, JOHN 40702 26TH ST. WEST BRADENTON FL 34207	☐ Delete	TITLE NAME STREET	-ZIP	RRAGE	, John E. 26 th St. W. NOON, FL 342		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET / CITY-ST	ADDRESS 3	V/S Brer 3006 V Parrist	y, LAURA P. DILLERNESS BLY N. FL.34219	a w∙	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	NAME STREET A	- 1	2	The second of th		Change	Addition
TITLE NAME Street Address City-St-Zip		☐ Delete	TITLE NAME STREET A					] Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET A CITY-ST		•			] Change	☐ Addition
TITLE Name Street address City-St-Zip		☐ Delete	TITLE NAME STREET A					Change	☐ Addition
of the cor	certify that the information supplied with the on this report or supplemental report is treporation or the receiver or trustee empower or on an attachment with an address, with the control of the contr	ue and accurate and that m ered to execute this report a	v sinnatiire	shall hav	e the same	lenal effect as if made under os	ith⊹that Iam	an officer.	or director