5/27

FILED
Jun 18, 2002 8:00 am
Secretary of State
05-27-2002 90448 019 ***150.00

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000031362

1. Entity Name
Geosurvey Petroleum, Inc. ✓

DO NOT WRITE IN THIS SPACE

93508

2. Principal Place of Business	3. Mailing Address
One Progress Plaza	One Progress Plaza
Suite 1210	Suite 1210
St Petersburg, FL 33701	St Petersburg, FL 33701
Zip 33701 Country USA	Zip 33701 Country USA

DO NOT WRITE IN THIS SPACE

4. FEI Number none ☑ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Powell, James N

Street Address (P.O. Box Number is Not Acceptable): One Progress Plaza Suite 1210

City: St Petersburg FL Zip Code: 33701

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: James N. Powell 4-28-02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Flynn, Harold F 995 Linden Ave. Boulder, CO 80304
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Flynn, Judith C. 995 Linden Ave Boulder, CO 80304
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CR2E036 (12/01)

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 or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

Judith C. Flynn 4-28-02 303 682 1212
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #