2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 07, 2004 08:00 AM
Secretary of State

DOCUMENT # P02000026506

1. Entity Name
LINDAU CHEVRON, INC.

Principal Place of Business	Mailing Address
6402 US HWY 301 N ELLENTON, FL 34222	6402 US HWY 301 N ELLENTON, FL 34222

07012004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
01-0624378
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

LINDAU, DAVID K
6402 US HWY 30 N
ELLENTON, FL 34222

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
Due by September 8, 2004

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	LINDAU, BARRY T
STREET ADDRESS	6402 US HWY 30 N
CITY-ST-ZIP	ELLENTON, FL 34222
TITLE	D
NAME	LINDAU, CANDICE A
STREET ADDRESS	6402 US HWY 30 N
CITY-ST-ZIP	ELLENTON, FL 34222
TITLE	V
NAME	LINDAU, DAVID K
STREET ADDRESS	6402 US HWY 30 N
CITY-ST-ZIP	ELLENTON, FL 34222
TITLE	P
NAME	LINDAN, ETOLA V
STREET ADDRESS	1637 COUNTRY WALK DR
CITY-ST-ZIP	ORANGE PARK, FL 32003
TITLE	ST
NAME	LINDAU, DEBORAH G
STREET ADDRESS	1295 D CARLTON ARMS CIR
CITY-ST-ZIP	LONGBOAT KEY, FL 34228
TITLE	D
NAME	LINDAU, JEFFREY H
STREET ADDRESS	442 RIVERMOOR DR
CITY-ST-ZIP	WATERFORD, WI 53185

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07/07/04-80008-011 150.00

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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: David K Lindau DAVID K. LINDAU 7/2/04 941-812-3140
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #