

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

**PROFIT
CORPORATION
ANNUAL REPORT
1996**



FLORIDA DEPARTMENT OF STATE
Sandra B. Markham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P08708 (0)

1. Corporation Name

STEUART GASOLINE IMPORTERS, INC.



Principal Place of Business

**4646 40TH STREET, NW
WASHINGTON DC 20016**

Mailing Address

**4646 40TH STREET, NW
WASHINGTON DC 20016**

2. Principal Place of Business

2a. Mailing Address

21	State, Apt. #, etc.	26	State, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Zip
24	Country	29	Country

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

3. Date of Incorporation or Qualification
01/15/1986

3a. Date of Last Report
02/27/1995

4. FID Number
52-1437908

Applied For
Not Applicable

5. On Change of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes. ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

FL

11. Pursuant to the provisions of Sections 607.06(2) and 607.15(6), Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.06(2), Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	STEUART, III, L. P.	
STREET ADDRESS	4646 40TH ST. N.W.	
CITY, ST, ZIP	WASHINGTON DC	
TITLE	PD	☒ DELETE
NAME	JOHNSON, JOHN C	
STREET ADDRESS	4646 40TH ST, NW	
CITY, ST, ZIP	WASHINGTON DC	
TITLE	S	☐ DELETE
NAME	SCHWARZ, JAMES N/	
STREET ADDRESS	4646 40TH ST, NW	
CITY, ST, ZIP	WASHINGTON DC	
TITLE	T	☐ DELETE
NAME	WAGGONER, JERRY A.	
STREET ADDRESS	4646 40TH ST. N.W.	
CITY, ST, ZIP	WASHINGTON, DC.	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PRESIDENT & DIRECTOR	☒ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☒ Change ☐ Addition
NAME	JOHN R CLARK III	
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☒ Change ☐ Addition
NAME	MICHAEL B GOWEN	
STREET ADDRESS		
CITY, ST, ZIP		
TITLE	VICE PRESIDENT	☐ Change ☒ Addition
NAME	GUY T STEUART II	
STREET ADDRESS	4646 40th St NW	
CITY, ST, ZIP	WASHINGTON, DC 20016	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

14. I do hereby certify that the information supplied in this filing is voluntarily furnished and does not qualify for the expedient statement in Section 119.07(3)(a), Florida Statutes. I further certify that the information included 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 authorized to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an additional entry in an address.

SIGNATURE:

Michael B. Gowen **MICHAEL B. GOWEN**

3/6/96

(202) 244-5425

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)