

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 02, 2005 8:00 am
Secretary of State

08-02-2005 90033 026 ***150.00

DOCUMENT # P13902

1. Entity Name
GLOBAL FUEL CO.



Principal Place of Business
**800 S. STREET
WALTHAM, MA 02154**

Mailing Address
**800 S. STREET
WALTHAM, MA 02154**

50059275



2. Principal Place of Business
800 South St.

3. Mailing Address
800 South St.

Suite, Apt. #, etc.
Suite 200

Suite, Apt. #, etc.
Suite 200

City & State
Waltham, MA

City & State
Waltham, MA

Zip
02454

Country

Zip
02454

Country

07142005 Chg-P CR2E034 (10/03)

4. FEI Number
04-2216350

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYES ST.
STE. 105
TALLAHASSEE, FL 32301**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005**

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 PD ☐ Delete
NAME SLIFKA, ALFRED A.
STREET ADDRESS 1 COMMONWEALTH AVE SUITE 3
CITY-ST-ZIP BOSTON, MA

TITLE V ☐ Delete
NAME MCMANMON, THOMAS A.
STREET ADDRESS 37 SUFFOLK ROAD
CITY-ST-ZIP CHESTNUT HILL, MA

TITLE S ☐ Delete
NAME FANEUIL, EDWARD
STREET ADDRESS 56 GATEWOOD DR
CITY-ST-ZIP NEEDHAM, MA

TITLE TD ☐ Delete
NAME SLIFKA, RICHARD
STREET ADDRESS 11 TAMARACK ROAD
CITY-ST-ZIP WESTON, MA

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/26/05
Date

Daytime Phone #