

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P18894

1. Entity Name

A.W. HERNDON OIL COMPANY, INCORPORATED

Principal Place of Business

100 NORTH COURT SQUARE
ABBEVILLE AL 36310

Mailing Address

100 NORTH COURT SQUARE
ABBEVILLE AL 36310-2135

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

HERNDON, AMOS WILEY, JR.
17135 FRONT BEACH RD. #15
PANAMA CITY BCH FL 32407

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.

SIGNATURE

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) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME ☐ Delete

PD
HERNDON, A.W.
STREET ADDRESS
OZARK ROAD
CITY-ST-ZIP
ABBEVILLE AL

TITLE NAME ☐ Delete

VD
HERNDON, BETTY
STREET ADDRESS
OZARK ROAD
CITY-ST-ZIP
ABBEVILLE AL

TITLE NAME ☐ Delete

SD
HERNDON, SHERRI
STREET ADDRESS
112 EMERALD LAKE
CITY-ST-ZIP
DOTHAN AL

TITLE NAME ☐ Delete

STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete

STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete

STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME ☒ Change ☐ Addition

STREET ADDRESS
CITY-ST-ZIP
105 North Court Square
Abbeville, AL 36310

TITLE NAME ☒ Change ☐ Addition

STREET ADDRESS
CITY-ST-ZIP
100 North Court Square
Abbeville, AL 36310

TITLE NAME ☒ Change ☐ Addition

STREET ADDRESS
CITY-ST-ZIP
106 Melissa Lane
Headland, AL 36345

TITLE NAME ☐ Change ☐ Addition

STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition

STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition

STREET ADDRESS
CITY-ST-ZIP

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

SIGNATURE: X

A.W. Herndon

1-18-2000

334-5856424

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #