FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 31 PM 3:16

DOCUMENT # P29044 (5)

1. Corporation Name
PETROLEUM TANK SERVICE, INC.

Principal Place of Business	Mailing Address
7335 ORR RD CHARLOTTE NC 28213	7335 ORR RD CHARLOTTE NC 28213

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/19/1990
3a. Date of Last Report: 08/09/1994

2. Principal Place of Business 21:
2a. Mailing Address 26:
Suite, Apt. #, etc. 22:
Suite, Apt. #, etc. 27:
City & State 23:
City & State 28:
Zip 24: Country 25:
Zip 29: Country 30:

4. FEI Number: 56-0637647 ☐ Applied For ☐ Not Applicable

5. Certificate 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

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

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

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PTD	1.1 TITLE	CEO T D	☒ Change ☐ Addition
NAME	PARRISH, PATRICIA P.	1.2 NAME	Parrish, Patricia P.	
STREET ADDRESS	7335 ORR RD	1.3 STREET ADDRESS	7335 Orr Road	
CITY-ST-ZIP	CHARLOTTE NC	1.4 CITY-ST-ZIP	Charlotte, NC 28213	
TITLE	VSD	2.1 TITLE	P D	☒ Change ☐ Addition
NAME	SMITH, MICHAEL D.	2.2 NAME	Smith, Michael D.	
STREET ADDRESS	7335 ORR RD	2.3 STREET ADDRESS	7335 Orr Road	
CITY-ST-ZIP	CHARLOTTE NC	2.4 CITY-ST-ZIP	Charlotte, NC 28213	
TITLE		3.1 TITLE	VP	☐ Change ☒ Addition
NAME		3.2 NAME	Wilkinson, Bruce	
STREET ADDRESS		3.3 STREET ADDRESS	7335 Orr Road	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Charlotte, NC 28213	
TITLE		4.1 TITLE	S	☐ Change ☒ Addition
NAME		4.2 NAME	Oden, Mark	
STREET ADDRESS		4.3 STREET ADDRESS	7335 Orr Road	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Charlotte, NC 28213	
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated 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 the receiver or trustee empowered 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 attachment with an address.

SIGNATURE: Michael Smith Michael Smith, Pres. 01-25-95 704-597-1910
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0396080 FP