

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Jan 26 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P31929 (3)
1. Corporation Name
PLANTATION PETROLEUM, INC. OF GEORGIA

Principal Place of Business
403 SMITH AVENUE
THOMASVILLE GA 31792
US

Mailing Address
P.O. BOX 146
THOMASVILLE GA 31799



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 11/28/1990	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 58-1908691	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	Yes No
9. Name and Address of Current Registered Agent MERCER, FRANK 3858 DWIGHT DAVIS DRIVE TALLAHASSEE FL 32312				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

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		Signature, typed or printed name of registered agent and title if applicable		(NOTE: Registered Agent signature required when reinstating)		DATE									
12. OFFICERS AND DIRECTORS								13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12							
TITLE		PCD		11 TITLE		Change Addition									
NAME		LEWIS, MONTY		12 NAME											
STREET ADDRESS		P.O. BOX 1694 (N/A)		13 STREET ADDRESS											
CITY - ST - ZIP		THOMASVILLE GA		14 CITY - ST - ZIP											
TITLE		V		21 TITLE		Change Addition									
NAME		CLARK, ANDREW, III		22 NAME											
STREET ADDRESS		PO BOX 146 N/A		23 STREET ADDRESS											
CITY - ST - ZIP		THOMASVILLE GA		24 CITY - ST - ZIP											
TITLE		SD		31 TITLE		Change Addition									
NAME		LEWIS, JANE		32 NAME											
STREET ADDRESS		P.O. BOX 1694 (N/A)		33 STREET ADDRESS											
CITY - ST - ZIP		THOMASVILLE GA		34 CITY - ST - ZIP											
TITLE		D		41 TITLE		Change Addition									
NAME		HARMON, LARRY		42 NAME											
STREET ADDRESS		215 TALL PINES DRIVE		43 STREET ADDRESS											
CITY - ST - ZIP		THOMASVILLE GA		44 CITY - ST - ZIP											
TITLE		V		51 TITLE		Change Addition									
NAME		RICHARD P. GRIFFIN		52 NAME											
STREET ADDRESS		RT 1 BOX 102		53 STREET ADDRESS											
CITY - ST - ZIP		OCHLOCKNEE GA		54 CITY - ST - ZIP											
TITLE				61 TITLE		Change Addition									
NAME				62 NAME											
STREET ADDRESS				63 STREET ADDRESS											
CITY - ST - ZIP				64 CITY - ST - ZIP											

14. 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 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: MONTY LEWIS, PRESIDENT 1-15-98 912-226-5100

CR2E034 (10/97)