

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$35.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P93000005929 (3)**

1. Corporation Name

TERRIER OIL COMPANY

Principal Place of Business

Mailing Address

**8 STAR LAKE DR
PENSACOLA FL 32507
US**

**8 STAR LAKE DR
PENSACOLA FL 32507
US**



3. Date Incorporated or Qualified

01/20/1993

3a. Date of Last Report

06/12/1995

2. Principal Place of Business

2a. Mailing Address

21 407 Bonaire Drive

26 407 Bonaire Drive

4. FEI Number

59-3168929

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State
23 Lafayette, Louisiana

27 City & State
28 Lafayette, Louisiana

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

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

24 Zip
70506

Country

29 Zip
70506

Country

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ANDERSON, ARDEN A
8 STAR LAKE DR
PENSACOLA FL 32507**

81 Name

Susan M. Anderson

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

406 Bayshore Drive

83

84 City

Pensacola

FL

85 Zip Code
32507

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

Susan M. Anderson

(NOTE: Registered Agent's signature required when registering.)

7/6/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
MILLS, GERALD D SR
7320 HAYWARD AVENUE
PENSACOLA FL 32506**

☐ DELETE

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PV
ANDERSON, ARDEN A
8 STAR LAKE DR
PENSACOLA FL**

☐ DELETE

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**ST
PATTON, SUSAN
8 STAR LAKE DR
PENSACOLA FL**

☐ DELETE

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

ST

Susan M. Anderson

406 Bayshore Drive

Pensacola, Florida 32507

☒ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

**900001893699
-07/16/96--01002--049
***225.00**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

☐ Change

☐ Addition

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)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Arden A. Anderson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Arden A. Anderson

6-14-96 (38) 984-0037

Date

Digit to Follow

CR2E034 (3/96)