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

APPROVED AND FILED

95 MAY -1 AM 8:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000010666 (3)

1. Corporation Name

NAVARRE EXXON, INC.

Principal Place of Business

8491 NAVARRE PARKWAY
NAVARRE FL 32566

Mailing Address

~~P.O. BOX 580~~
~~GULF BREEZE FL 32562-0580~~
8491 Navarre Parkway
Navarre, Fl 32566

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/09/1994
3a. Date of Last Report:

4. FEI Number: 59-3219068 — 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

2. Principal Place of Business (21) / Suite, Apt. # etc. (22) / City & State (23) / Zip (24) / Country (25)

2a. Mailing Address (26) / Suite, Apt. # etc. (27) / City & State (28) / Zip (29) / Country (30)

9. Name and Address of Current Registered Agent

FRITZ, BLAINE A
1012 PANFERIO DRIVE
PENSACOLA BEACH FL 32561

10. Name and Address of New Registered Agent

81 Name: James Russell Hess
82 Street Address (P.O. Box Number is Not Acceptable): 2862 Ferriss Drive
83
84 City: Navarre FL 85 Zip Code: 32566

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] James R. Hess President 4/26/95

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	James Russell Hess
STREET ADDRESS	2862 Ferriss Drive
CITY-ST-ZIP	Navarre Fl 32566

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

		Change	Addition
1 TITLE / 1 NAME / 1 STREET ADDRESS / 1 CITY-ST-ZIP		[ ]	[ ]
2 TITLE / 2 NAME / 2 STREET ADDRESS / 2 CITY-ST-ZIP		[ ]	[ ]
3 TITLE / 3 NAME / 3 STREET ADDRESS / 3 CITY-ST-ZIP		[ ]	[ ]
4 TITLE / 4 NAME / 4 STREET ADDRESS / 4 CITY-ST-ZIP		[ ]	[ ]
5 TITLE / 5 NAME / 5 STREET ADDRESS / 5 CITY-ST-ZIP		[ ]	[ ]
6 TITLE / 6 NAME / 6 STREET ADDRESS / 6 CITY-ST-ZIP		[ ]	[ ]

14. I do 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: [signature] James R. Hess 4/12/95 (904) 939-0028

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0301206 CP