

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Mar 01, 1999 8:00 am  
Secretary of State

03-01-1999 90181 012 \*\*\*150.00

DOCUMENT # P94000065094

Corporation Name

PARADISE SERVICE STATION MANAGEMENT CORP.

Principal Place of Business

5 BOX 119  
PINE KEY ROAD  
PINE KEY FL 33043

Mailing Address

P.O. DRAWER 430663  
BIG PINE KEY FL 33043  
US



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/02/1994

4. FEI Number

65-0526655

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 owes the current year Intangible  
Personal Property Tax. ☒ Yes ☐ No

Principal Place of Business

286 Lobstertail Road

Suite, Apt. #, etc.

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

City & State

28

Zip

Country

25

Zip

Country

29

30

9. Name and Address of Current Registered Agent

BURNS, ALAN H. III  
R.R. 5 BOS 119J  
LOBSTERTAIL ROAD  
BIG PINE KEY FL 33043

10. Name and Address of New Registered Agent

81 Name

Allan H. Burns III

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

286 Lobstertail Road

83

84 City

Big Pine Key

FL

85 Zip Code

33043

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

P ☐ DELETE  
BURNS, ALAN H.  
R.R. 5 BOX 119J LOBSTERTAIL ROAD  
BIG PINE KEY FL

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

☒ Change ☐ Addition

Allan H. Burns III

286 Lobstertail Road

Big Pine Key, FL 33043

VP ☐ DELETE  
BURNS, SUSAN  
R.R. 5 BOX 119J LOBSTERTAIL ROAD  
BIG PINE KEY FL

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☒ Change ☐ Addition

286 Lobstertail Road

Big Pine Key, FL 33043

☐ DELETE

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change ☐ Addition

☐ DELETE

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

☐ DELETE

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

☐ DELETE

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Day

Daytime Phone #

CR2E034 (11/98)