2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000014897 Feb 15, 2000 8:00 am Secretary of State 1. Entity Name TAYLOR PETROLEUM COMPANY, INC. 02-15-2000 90004 021 ***150.00 Principal Place of Business Mailing Address 1212 W LIVINGSTON AVE 77 2ND STREET ORLANDO FL 32805-0968 SOMERVILLE NJ 08876-2915 2. Principal Place of Business (3. Mailing Address Suite, Apt. #, étc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State Applied For City & State 4. FFI Number 22-3384150 Not Applicable Zip Country Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name COLLINS, GEORGE G JR Street Address (P.O. Box Number is Not Acceptable) # 27777 756 BEACHLAND BLVD. VERO BEACH FL 32963 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. TITLE ☐ Delete TITLE Change ☐ Addition NAME TAYLOR, GEORGE F NAME STREET ADDRESS STREET ADDRESS 77 2ND STREET CITY-ST-ZIP CITY-ST-ZIP SOMERVILLE NJ 08876 ☐ Addition ☐ Delete TITLE WORKMAN, RICHARD NAME NAME STREET ADDRESS STREET ADDRESS 20 BAKER CIR CITY-ST-ZIP CITY-ST-7IP SOMERVILLE NJ 08876 ☐ Addition ☐ Change :TITLE Delete SPALDING, FRANKIE NAME NAME STREET ADDRESS 158 KLINESVILLE RD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FLEMINGTON NJ 08826 ☐ Change ☐ Addition □ Celete TITLE TITLE TAYLOR, DAVID NAME NAME STREET ADDRESS STREET ADDRESS 173 W HIGH ST CITY-ST-ZIP CITY-ST-ZIP SOMERVILLE NJ 08876 Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an agriculture shall be a provided by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an agriculture shall be a provided by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an agriculture shall be a provided by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed.

Daytime Phone #

UNE REQUIRE

MATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: