

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 13, 2002 8:00 am**  
**Secretary of State**

05-13-2002 90121 012 \*\*\*150.00

**DOCUMENT # P96000078947**

1. Entity Name

**GULF ENERGY CORPORATION**

Principal Place of Business

Mailing Address

~~625 17TH ST NE~~

~~625 17TH ST NE~~

~~ST PETERSBURG FL 33704~~

~~ST PETERSBURG FL 33704~~

~~US~~

~~US~~

2. Principal Place of Business

**230 65<sup>TH</sup> STREET N**

3. Mailing Address

**230 65<sup>TH</sup> STREET N**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**ST. PETERSBURG, FL**

City & State

**ST PETERSBURG, FL**

Zip

Country

**33710**

**US**

Zip

Country

**33710**

**US**

6. Name and Address of Current Registered Agent

**CRONIN, MICHAEL T**  
**911 CHESNUT STREET**  
**CLEARWATER FL 34616**

7. Name and Address of New Registered Agent

Name

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

City

**FL**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete  
NAME **MAYO, DARRYL K**  
STREET ADDRESS ~~625 17TH ST NE~~  
CITY-ST-ZIP **ST PETERSBURG FL**

TITLE **VD** ☐ Delete  
NAME **CHIARO, CASSANDRA M**  
STREET ADDRESS ~~2416 YORKTOWN APT 407~~  
CITY-ST-ZIP **HOUSTON TX**

TITLE **SD** ☐ Delete  
NAME ~~MAYO, GERALDINE R~~  
STREET ADDRESS **1555 BRIGHTWATERS BLVD NE**  
CITY-ST-ZIP **ST PETERSBURG FL**

TITLE **V** ☐ Delete  
NAME **MAYO, ROGER C**  
STREET ADDRESS **1555 BRIGHTWATERS BLVD NE**  
CITY-ST-ZIP **ST PETERSBURG FL**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☒ Change ☐ Addition  
NAME **MAYO, DARRYL K.**  
STREET ADDRESS **230 65<sup>TH</sup> STREET N.**  
CITY-ST-ZIP **ST. PETERSBURG, FL**

TITLE **VD** ☒ Change ☐ Addition  
NAME **CHIARO, CASSANDRA M.**  
STREET ADDRESS **6038 FLOYD**  
CITY-ST-ZIP **HOUSTON, TEXAS**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
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 address, with all other like empowered.

SIGNATURE:

**DARRYL K. MAYO**

**April 23, 2002**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)