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

PROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

TITLE NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000091020 (3)

**ORANGE STATE OIL COMPANY** 

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Principal Place of Business Mailing Address							
	BEACHLAND BLVD. IO BEACH FL 32963	756 BEACHLAND BLVD. VERO BEACH FL 32963				DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified	
						11/01/1996	
	incipal Place of Business	2a. Mailing Addr	988			4. FEI Number	Applied For
21		26				65-0729271	Not Applicable
	ilte, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State	City & State				Fee Required
23		28			<b>6.</b> Election Campaign Financing  Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	p Country			Country		8. This corporation owes or has paid the	
24	25	29	30			Personal Property Tax due June 30.	Yes No
-	9. Name and Address of Cur					10. Name and Address of New Registe	
	COLLINS, GEORGE G JR.			81 Na	ame		
756 BEACHLAND BLVD.				<b>82</b> St	reet Addr	ress (P.O. Box Number is Not Acceptable)	···
VERO BEACH FL 32963					i dot i todi.	oss (1.0. Box Number is Not Neceptable)	
				83			
1				<b>84</b> Ci	tv		B5 Zip Code
			_				<b>-L</b>
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its runoffice 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 reg							
a	gent. I am familiar with, and accept the ob	ligations of, Section 607.	0505, Florida	Statutes.	oo poran	iona board of directors. Thereby decept the	appointment as regioneres
SIGN	ATURE						
12.	Signature, typed or printed name of registered	agent and title if applicable.  AND DIRECTORS		listerad Agent sig	nature require	ed when reinstating) DA ADDITIONS/CHANGES TO OFFICERS	
TITLE	PSTD	DE		1.1 TITLE		ADDITIONS/OFFAINALS TO OFFICE AD	Change Addition
NAME	COPELAND, PATRICK T	_		1.2 NAME			
1	ADDRESS 7150 20TH STREET, SUITI	Н		1.3 STREET ADDE	ess		
CITY-SI	LEDO BELOU EL		•	1.4 CITY-ST-ZIP	1		
TITLE		□ DE		2.1 TITLE			☐ Change ☐ Addition
NAME			ŀ	2.2 NAME			
STREET	ADDRESS			2 3 STHEET ADDR	ESS		
CITY-ST	T-ZIP		Ì	2. 4 CITY-ST-ZIF	<u> </u>		
TITLE		☐ DE	LETE	3.1 TITLE			Change Addition
NAME	1			3.2 NAME			
STREET	ADORESS 1		1	3 3 STREET ADDR	ESS		
CITY-S1	T-ZIP	······································		3.4. CITY - ST - ZIF			
TITLE	ĺ	D£		4.1 TITLE			☐ Change ☐ Addition
NAME			1	4. 2 NAME	}		,
	ADDRESS			4.3 STREET ADDR	ESS		
CITY-S1	T-ZIP	T ar		4.4 CITY-ST-ZIP			Change Ladde-
TITLE	{	☐ DE		51 TITLE	l l		Change Addition
NAME				5.2 NAME			

14. Thereby 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 eath; 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.

5.3 STREET ADDRESS

6.3 STREET ADDRESS 6.4 City - St - Zip

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

DELETE

1/22/90

(561)569-9003

Change

Addition

**FILED** 

Feb 09 1998 8:00am

Secretary of State