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

PROFIT CORPORATION ANNUAL REPORT

1998

NAME

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000104397 (9)

PETROLEUM PARTNERS, INC.

FILED Apr 28 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing	Mailing Address 110 RAND YARD ROAD					
110 RAND Y	ARD ROAD	110 R						
SANFORD FL 32771		SANFO	SANFORD FL 32771				DO NOT WRITE IN THE COLOR	
•							DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified	
							12/09/1997	
2. Principal P	Place of Business	2a. Mait	2a. Mailing Address				4. FEI Number Applied For	
21		26					59-3481966 Not Applicable	
Suite, Apt.	#, <b>9</b> 1C.	<b>├</b> ──	Suite, Apt #, etc.				5. Certificate of Status Desired \$8.75 Additional	
22 City & Stat			City & State				Fee Required	
<del>_</del>	в.		ê '				6. Election Campaign Financing \$5.00 May Be	
Zip	Country	28 Zin	Zip Country			····	Trust Fund Contribution	
24	25 29 30		<u> </u>	~ ·		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
671	9. Name and Address of Curre		Agent	1901	r-		10. Name and Address of New Registered Agent	
80	CHULTE, J T				81	Name		
110 RAND YARD ROAD					82			
SANFORD FL 32771						Street Ad	dress (P.O. Box Number is Not Acceptable)	
					83			
					L_			
					84	City	FL 85 Zip Code	
11. Pursuant	to the provisions of Sections 607.05	02 and 607,15	08, Florida Statu	ites, the a	bovi	e-named co	reporation submits this statement for the purpose of changing its registered	
office or r	registered agent, or both, in the Sta im familiar with, and accept the obli	le of Florida, Su dations of Sec	Joh change was tion 607 0505 F	authorize Iorida Stat	d by	y the corpor:	ation's board of directors. I hereby accept the appointment as registered	
SIGNATURE		g 2.1, 00t.		101100 0101				
SIGNATURE	Signature, typed or printed name of registered a	gent and lete if appli	nable (NO	TE Registere	d Age	ent signature req	uired when reinstaling) CATE	
12.	<del></del>	ND DIRECTOR		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	0		DELETE 1.1		TLE		Change Addition	
NAME	LETCHWORTH, CHARLES /	<b>\</b>		1.2 N	AME			
STREET ADDRESS	110 RAND YARD RD			1.3 S1	TREET	ADDRESS		
CITY-ST-ZIP	SANFORD FL 32771				1.4 CITY-ST-ZIP			
TITLE	D		☐ DELETE	2.1 TI	TLE		☐ Change ☐ Addition	
NAME	HARVEY, WILLIAM T			2.2 N/	AME			
STREET ADDRESS	110 RAND YARD RD			2.3 S1	REET	ADDRESS		
CITY-ST-ZIP	SANFORD FL 32771				. 4 CITY - ST - ZIP			
TITLE			DELETE	3.1 TI			☐ Change ☐ Addition	
NAME				3.2 N/			· ·	
STREET ADDRESS				3.3 S1	TREET	ADDRESS		
CITY-ST-ZIP				_		ST-ZIP		
TITLE			□ DELETE	4.1 ¥0	TLE	ŀ	☐ Change ☐ Addition	
NAME				4. 2 N	AME			
STREET ADDRESS				4.3 ST	TREE1	ADDRESS		
CITY-ST-ZIP				_		T-ZIP		
TITLE			☐ DELETE	, 5.1 TC	TL€		☐ Change ☐ Addition	
NAME				5.2 N/	AME	ſ		
STREET ADDRESS				5.3 ST	TREET	ADDRESS		
CITY-ST-ZIP				5.4 CI	TY-S	I - ZIP		
TIT. T			DELETE	0.4.71	T. F	1	Change Addition	

14. 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 suppliemental 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 chapter (3) on an altacument with an address.

6.2 NAME

6.3 STREET ADDRESS

CNATURE DIRECT

4-15-98 407 322-6560