2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2005 08:00 AM
Secretary of State

Daytime Phone #

		IVEL OILL				5, 2005 00.00 1
1. Entity Na	JMENT # P990000641				Sec	cretary of State
•	ce of Business POINT AVENUE 34102	Mailing Address 1400 BLUEPOINT AVENUE NAPLES, FL 34102				
			······			
DO NOT WRITE IN THIS SPACE			CE	01052005	No Chg-P	CR2E034 (10/03)
				4. FEI Numb 59-359		Applied For Not Applicable \$8.75 Additional
	6. Name and Address of Current Re	ristered Agent		J. Certificate		Fee Required
VARIAN, WILLIAM S 1400 BLUEPOINT AVENUE NAPLES, FL 34102			DO NOT WRITE IN THIS SPACE			
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. I am familiar with, and accept the obligations of registered agent.						
SIGNATURE						
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.			ncing \$5.	00 May Be ed to Fees		
10.	OFFICERS AND DIF	ECTORS	Ī			· · · · · · · · · · · · · · · · · · ·
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VARIAN, WILLIAM J 210 31ST STREET, N.W. NAPLES, FL 34120					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD VARIAN, MARIE E 1400 BLUEPOINT AVENUE NAPLES, FL 34102				- 000000 01/19/05-)783581 -80073-021 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD VARIAN, WILLIAM S 1400 BLUEPOINT AVE NAPLES, FL 34102		An / 2 -	DO	NOT W	RITE
TIFLE NAME STREET ADDRESS CITY-ST-ZIP				IN -	THIS SP	ACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					-	
TITLE NAME STREET ADDRESS						

12. 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 path; 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARIE E VARIAN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR