

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 24 PM 4:19

DOCUMENT # **S04280** (1)

1. Corporation Name

AMERICAN PETROLEUM PRODUCTS, INC.

Principal Place of Business

Mailing Address

**6061 MERRILL ROAD
JACKSONVILLE FL 32211**

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JACKSONVILLE FL 32211**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 10/01/1990	3a. Date of Last Report 03/11/1994
4. FEI Number 59-3036372	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under § 199.032, Florida Statutes ☒ Yes ☐ No	

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

9. Name and Address of Current Registered Agent

**ELKINS, J. H., JR.
3548 SANDBURG ROAD
JACKSONVILLE FL 32211**

10. Name and Address of New Registered Agent

81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	
FL	85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits the statement for the purpose of changing its registered office 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 registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent, and the address

Signature, typed or printed name of registered agent, and the address

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS, IF ANY	
TITLE	DP	1. TITLE	☐ Change ☐ Addition
NAME	DAVIS, BARBARA A.	12. NAME	
STREET ADDRESS	1 PINE LAKES PT.	13. STREET ADDRESS	
CITY, ST, ZIP	SAVANNAH GA	14. CITY, ST, ZIP	
TITLE	D	21. TITLE	☐ Change ☐ Addition
NAME	WEINBERG, RAY LOUIS	22. NAME	
STREET ADDRESS	1329 WENTWORTH AVE.	23. STREET ADDRESS	
CITY, ST, ZIP	JACKSONVILLE FL	24. CITY, ST, ZIP	
TITLE	DTS	31. TITLE	☐ Change ☐ Addition
NAME	ELKINS, A. H. J	32. NAME	
STREET ADDRESS	3548 SANDBURG ROAD	33. STREET ADDRESS	
CITY, ST, ZIP	JACKSONVILLE FL	34. CITY, ST, ZIP	
TITLE		41. TITLE	☐ Change ☐ Addition
NAME		42. NAME	
STREET ADDRESS		43. STREET ADDRESS	
CITY, ST, ZIP		44. CITY, ST, ZIP	
TITLE		51. TITLE	☐ Change ☐ Addition
NAME		52. NAME	
STREET ADDRESS		53. STREET ADDRESS	
CITY, ST, ZIP		54. CITY, ST, ZIP	
TITLE		61. TITLE	☐ Change ☐ Addition
NAME		62. NAME	
STREET ADDRESS		63. STREET ADDRESS	
CITY, ST, ZIP		64. CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.032, Florida Statutes. I further certify that the information included 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 oath. That I am an officer or director of the corporation or the receiver or trustee empowered to make the 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.

SIGNATURE:

E. M. Davis

E. M. DAVIS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/18/95

(912) 232-0620