2003 FOR PROFIT CORPORATION

FILED Feb 04, 2003 8:00 am Secretary of State **UNIFORM BUSINESS REPORT (UBR** S08268 DOCUMENT # 1. Entity Name 02-04-2003 90117 023 ***150.00 BAY COUNTY OIL CO., INC. Principal Place of Business Mailing Address 3850 HOLCOMB BRIDGE RD 1524-E-BUSINESS-HWY 98 PANAMA CITY FL 32401 SUITE 255 NORCROSS GA 30092 US US 3. Mailing Addres 2. Principal Place of Business OMMERC Suite, A CHECK HERE IF MAKING CHANGES Applied For City & State 4. FEI Number Oftv & State 59-3038356 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name JELKS, ALLEN N., JR. Street Address (P.O. Box Number is Not Acceptable) % JOHNSON, HARRIS & GERDE, P.A. 239 E. 4TH ST. PANAMA CITY FL 32401 City 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. I am familiar with, and accept the obligations of registered agent. **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. TITLE ☐ Delete TITI F RUSSELL, BARRON J. NAME NAME STREET ADDRESS 1524 E. BUSINESS HWY. 98-STREET ADDRESS **PANAMA CITY FL** CITY-ST-ZIP CITY-ST-7IP ☐ Delete ☐ Addition TITLE TD TITLE RUSSELL. BARRON JEFF NAME NAME 1524 E BUSINESS HWY 98 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP RANAMA CITY FL ☐ Addition TITLE ☐ Delete TITLE Change NAME RUSSELL, NANCY H NAME 1524 E BUSINESS HWY 98-STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PANAMA CITY FL --Change Addition ☐ Delete TITILE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Defete TITLE Addition NAME NAME

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 oath; that I am an officer or director of the corporation or the feceiver 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 attach ent with an address

STREET ADDRESS

CITY-ST-7IP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

CR2E034 (10/02)