

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

**PROFIT
CORPORATION
ANNUAL REPORT
1996**



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

DOCUMENT # S74986 (8)

1. Corporation Name

DE SOTO OIL & GAS, INC.



Principal Place of Business

**700 SOUTH PALAFOX STREET
1C
PENSACOLA FL 32501
US**

Mailing Address

**700 SOUTH PALAFOX STREET
1C
PENSACOLA FL 32501
US**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

**BRASLOW, DENIS A.
220 S. PALAFOX ST.
SUITE 300
PENSACOLA FL 32501**

3. Date Incorporated or Qualified

08/21/1991

3a. Date of Last Report

04/03/1995

4. FEI Number

65-0286921

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 s. 199.032,
Florida Statutes



Yes



No

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 this 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 below of registered agent, if applicable.

DATE Registered Agent signature required when resigning.

DATE

12. OFFICERS AND DIRECTORS

TITLE CVD
NAME MASLANKA, EDWARD
STREET ADDRESS 3737 EL JOBEAN RD SR 776
CITY-ST-ZIP PT. CHARLOTTE FL

☐ DELETE

TITLE STD
NAME MASLANKA, MARIE
STREET ADDRESS 3737 EL JOBEAN RD SR 776
CITY-ST-ZIP PT. CHARLOTTE FL

☐ DELETE

TITLE V
NAME KNISELY, WILLIAM
STREET ADDRESS 4775 CASENAVE DR.
CITY-ST-ZIP PENSACOLA FL

☐ DELETE

TITLE V
NAME NOYES, ROBERT S
STREET ADDRESS 3945 MONTALVO DR.
CITY-ST-ZIP PENSACOLA FL

☐ DELETE

TITLE P
NAME HODGES, GREGORY
STREET ADDRESS 4100 BRITTANY COURT
CITY-ST-ZIP PENSACOLA FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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☐ Change ☐ Addition

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 119.07(3)(k), 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 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 changed, or on an attachment with an address.

SIGNATURE:

Robert S. Noyes

Vice President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/96

904-432-9588

CR2E034 (12/95)