

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 # V68077 (9)

1. Corporation Name

SOUTHERN PORTER OIL, INC.



Principal Place of Business

2637 BURLINGTON AVENUE NORTH
ST. PETERSBURG FL 33713

Mailing Address

2637 BURLINGTON AVENUE NORTH
ST. PETERSBURG FL 33713

3. Date Incorporated or Qualified
09/29/1992

3a. Date of Last Report
09/07/1995

2. Principal Place of Business

21 2611 Burlington Ave N.

2a. Mailing Address

26 2611 Burlington Ave

4. FEI Number

59-3150652

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

City & State

23 St. Petersburg

City & State

28 St. Pete

Zip

24 33713

Country

25 Pinellas

Zip

29 33713

Country

30 Pinellas

9. Name and Address of Current Registered Agent

PINGOR, BRIAN R.
2861 EXECUTIVE DRIVE
SUITE 200
CLEARWATER FL 34622

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 name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE VPD ☐ DELETE

NAME JEFFREY, ROBERT W.
STREET ADDRESS 2637 BURLINGTON AVENUE N
CITY-ST-ZIP ST. PETERSBURG FL

TITLE PD ☐ DELETE

NAME BARKLEY, RORY W.
STREET ADDRESS 2611 BURLINGTON AVENUE N
CITY-ST-ZIP ST. PETERSBURG FL

TITLE ☐ DELETE

NAME *SD Tara Sculise*
STREET ADDRESS 2611 Burlington Ave W.
CITY-ST-ZIP St. Pete 33713

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME VPD Jeffrey Robert W.
1.3 STREET ADDRESS 710 31st St. North
1.4 CITY-ST-ZIP St. Petersburg FL 33713

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME SD Tara Sculise
3.3 STREET ADDRESS 2611 Burlington Ave W.
3.4 CITY-ST-ZIP St. Pete 33713

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 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 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, unchanged, or on an attachment with an address.

SIGNATURE: *Robert W. Jeffrey*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-30-96 813 893 7877
Date Daytime Phone #

CR2E034 (12/95)