

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 12 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 219894 (3)
1. Corporation Name
RIDGE RESOURCES, INC.

Principal Place of Business
1470 HWY. 17 SOUTH
BARTOW FL 33830
US

Mailing Address
C/O A E HOLLAND, JR
P.O. BOX 818
BARTOW FL 33831
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/01/1959	
21 Suite, Apt. #, etc.	26	Suite, Apt. #, etc.		4. FEI Number 59-6080945	Applied For Not Applicable
22 City & State	27	City & State		5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
23 Zip	28	Zip		6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
24 Country	29	Country		8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. ☐ Yes ☐ No	

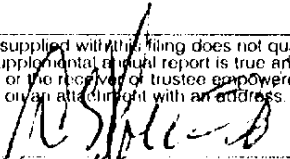
9. Name and Address of Current Registered Agent HOLLAND, A E, JR 1470 HWY 17, SOUTH BARTOW FL 33830				10. Name and Address of New Registered Agent	
81 Name				82 Street Address (P.O. Box Number is Not Acceptable)	
83				84 City	
				85 Zip Code FL	

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	☐ DELETE		1.1 TITLE	☐ Change ☐ Addition		
NAME	HOLLAND, A.E. JR			1.2 NAME			
STREET ADDRESS	1470 HIGHWAY 17 S			1.3 STREET ADDRESS			
CITY-ST-ZIP	BARTOW, FL 00000			1.4 CITY-ST-ZIP			
TITLE	SD	☐ DELETE		2.1 TITLE	☐ Change ☐ Addition		
NAME	KING, AUGUSTUS			2.2 NAME			
STREET ADDRESS	1470 HIGHWAY 17 S			2.3 STREET ADDRESS			
CITY-ST-ZIP	BARTOW FL			2.4 CITY-ST-ZIP			
TITLE	VTD	☐ DELETE		3.1 TITLE	☐ Change ☐ Addition		
NAME	MCLAULIN, DOUG, JR			3.2 NAME			
STREET ADDRESS	1470 HIGHWAY 17 S			3.3 STREET ADDRESS			
CITY-ST-ZIP	BARTOW, FL 00000			3.4 CITY-ST-ZIP			
TITLE	AT	☐ DELETE		4.1 TITLE	☐ Change ☐ Addition		
NAME	PETERSON, JAMES H			4.2 NAME			
STREET ADDRESS	US HWY 341 SOUTH			4.3 STREET ADDRESS			
CITY-ST-ZIP	HAZELHURST GA			4.4 CITY-ST-ZIP			
TITLE		☐ DELETE		5.1 TITLE	☐ Change ☐ Addition		
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		☐ DELETE		6.1 TITLE	☐ Change ☐ Addition		
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY-ST-ZIP			

14. 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 annual 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 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:  1/28/98 (941) 533-1147

CR2E034 (10/97)