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 # **400936** **(1)**

1. Corporation Name

J.E. CHILDERS DRILLING, INC.

Principal Place of Business

8305 MILLER DR
MIAMI FL 33155
US

Mailing Address

C/O ROGER A BRIDGES
334 MINORCA AVE. STE 200
CORAL GABLES FL 33134

3. Date Incorporated or Qualified: 05/11/1972

3a. Date of Last Report: 02/01/1995

2. Principal Place of Business

21 8305 Miller Drive.

Suite, Apt. #, etc.

22 —

City & State

23 Miami Florida.

Zip 24 33155 Country 25 U.S.A.

2a. Mailing Address

26 8305 Miller Drive

Suite, Apt. #, etc.

27 —

City & State

28 Miami Florida

Zip 29 33155 Country 30 U.S.A.

4. FEI Number: 59-1399477 — 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

9. Name and Address of Current Registered Agent

BRIDGES, ROGER A
334 MINORCA AVE, STE 200
CORAL GABLES FL 33134

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 of Registered Agent or Officer of Registered Agent Corporation Filing Change — Print Registered Agent's Name if Required Where Signature Is Illegible — DATE

12. OFFICERS AND DIRECTORS

TITLE	VP	☐ DELETE
NAME	HEARN II, CARL G	
STREET ADDRESS	3317 STATLER DR.	
CITY, ST, ZIP	MESQUITE TX	
TITLE	PD	☐ DELETE
NAME	CHILDERS, JAMES E	
STREET ADDRESS	8305 MILLER DRIVE	
CITY, ST, ZIP	MIAMI FL	
TITLE	AVP	☐ DELETE
NAME	CHILDERS, MARJORIE H	
STREET ADDRESS	8305 MILLER DRIVE	
CITY, ST, ZIP	MIAMI FL	
TITLE	AVD	☐ DELETE
NAME	MADDUX, MCMINN SUSAN	
STREET ADDRESS	112 N. COUNTRY CLUB DRIVE	
CITY, ST, ZIP	HENDERSONVILLE TN	
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		
1.3 STREET ADDRESS		
1.4 CITY, ST, ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY, ST, ZIP		
3.1 TITLE	S/T	☒ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY, ST, ZIP		
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		

CR2E034 (12/95)

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: J. E. Childers — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date: 1/25/96 — Daytime Phone #: (305) 274-4609