

**2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F13000005386

**Entity Name:** WARRIOR ENERGY SERVICES CORPORATION

**Current Principal Place of Business:**

1001 LOUISIANA STREET, SUITE 2900  
HOUSTON, TX 77002

**Current Mailing Address:**

1001 LOUISIANA STREET, SUITE 2900  
HOUSTON, TX 77002

**FEI Number: 20-8009424**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

*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.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            HARDY, SAMUEL  
Address        1001 LOUISIANA STREET, SUITE 2900  
  
City-State-Zip: HOUSTON TX 77002

Title            CFO  
Name            DAVIS, MIKE  
Address        1001 LOUISIANA STREET, SUITE 2900  
  
City-State-Zip: HOUSTON TX 77002

Title            VP AND TREASURER  
Name            TAYLOR, ROBERT S  
Address        1001 LOUISIANA STREET, SUITE 2900  
  
City-State-Zip: HOUSTON TX 77002

Title            VP  
Name            DAVIS, LARRY  
Address        1001 LOUISIANA STREET, SUITE 2900  
  
City-State-Zip: HOUSTON TX 77002

Title            VP  
Name            DUBOIS, JEFF  
Address        1001 LOUISIANA STREET, SUITE 2900  
  
City-State-Zip: HOUSTON TX 77002

Title            VP  
Name            EDGE, RONNIE  
Address        1001 LOUISIANA STREET, SUITE 2900  
  
City-State-Zip: HOUSTON TX 77002

Title            SECRETARY  
Name            NOLAN, PORTER H.  
Address        1001 LOUISIANA STREET, SUITE 2900  
  
City-State-Zip: HOUSTON TX 77002

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE: PORTER H. NOLAN**

**SECRETARY**

**05/01/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date