

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

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May 08 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 423776

(4)

1. Corporation Name

FLORIDA WELL SERVICE, INC.

Principal Place of Business

Mailing Address

Highway 29

Highway 29

Highway 29

P.O. Box 30

P.O. Box 30

P.O. Box 30

FELDA, FL 33930

Felda, FL 33930

FELDA, FL 33930-0030

P.O. Box 30

Felda, FL 33930

3. Date Incorporated or Qualified
04/20/1973

3a. Date of Last Report
05/28/1996

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

10. Name and Address of New Registered Agent

BARRETT, RICHARD LEE

~~810 HIGHLAND AVE~~
~~ORLANDO 32803~~

255 South Orange Avenue
Suite 750
Orlando, FL 32801

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 reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME ROBERTS, WILLIE
STREET ADDRESS 510 POINESETTA AVE.
CITY-ST-ZIP LEHIGH FL

☐ DELETE

TITLE VPD
NAME ROBERTS, CONNIE
STREET ADDRESS 510 POINESETTA AVE.
CITY-ST-ZIP LEHIGH FL

☐ DELETE

TITLE STD
NAME CAMPBELL, WANDA
STREET ADDRESS 9704 MAPLE CREST CR.
CITY-ST-ZIP LEHIGH FL

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

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

234 N. Willis Ranch Road
Felda, FL 33930

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

234 N. Willis Ranch Road
Felda, FL 33930

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 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: *Willie Roberts*

4-28-97 971-675-2422

CR2E034 (9/96)