## 2001 UNIFORM BUSINESS REPORT (UBR)

## Apr 27, 2001 8:00 am Secretary of State **DOCUMENT # 465226** 1. Entity Name PARTRIDGE WELL DRILLING COMPANY, INC. 04-27-2001 90405 011 \*\*\*150 00 Principal Place of Business Mailing Address 3233 HWY 17 SOUTH ORANGE PARK FL 32073 (Hab) 11/16 (Hab) " h i --ORANGE PARK FL 32073 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-1564237 Not Applicable Zip Country \$8.75 Additional Zip--Country 5. Certificate of Status Desired 32003-7/15 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name PARTRIDGE, DONAL MERRITT, JR. Street Address (P.O. Box Number is Not Acceptable) 4744 COLLINS ROAD ORANGE PARK FL 32073 Zip Code 8. 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 Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Addition Delete TITLE TITLE ALDERSON LINDA LOUISE NAME NAME 18886 OSPREY BLUFF BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORANGE PARK FL 32003 Addition ☐ Change ☐ Delete TITLE TITLE PARTRIDGE, MARGARET BLK NAME NAME STREET ADDRESS 3233 HWY 17 S STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORANGE PARK FL ~ Change ... Addition .. PD - - - - - - - - - - - - -TITLE --- < TITLE Delete NAME Partridge jr donal merritt NAME STREET ADDRESS 3125 CREIGHTON FOREST RD STREET ADDRESS CITY-ST-ZIP ORANGE PARK FL 32003 CITY-ST-ZIP PART Change Addition ☐ Delete TITLE RIDGE, DONAL MERRITT NAME NAME STREET ADDRESS 60 OLD HARD ROAD STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ORANGE PARK FL 32003 ☐ Change ☐ Addition ☐ Delete TITLE TITLE SOHA, DIANE NAME 🐧 NAME STREET ADDRESS 2120 FLINTLOCK CT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP GREEN COVE SPRGS, F00000 320 43 ☐ Delete ☐ Change ■ Addition TITLE TITLE PARTRIDGE, MARGARET BLK NAME NAME 3233 HWY 17 S STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ORANGE PARK, FL 0

13. 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 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 11 or Block 12 in changed, or on an attachment with an address, with all other like empowered.

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