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PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 558674 (8)

1. Corporation Name

AMERICAN DRILLING, INC.



Principal Place of Business

**14811 N. 12TH STREET
LUTZ FL 33549**

Mailing Address

**14811 N. 12TH STREET
LUTZ FL 33549**

3. Date Incorporated or Qualified

02/01/1978

3a. Date of Last Report

06/12/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HOWELL, LINDA J.
7405 WILLIAMS RD
SEFFNER FL 33584**

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 the person named as registered agent in this statement.

Signature of Registered Agent (separate from date of signature)

Date

12. OFFICERS AND DIRECTORS

TITLE	P	☐ DELETE
NAME	HOWELL, JERRY C.	
STREET ADDRESS	7405 WILLIAMS ROAD	
CITY - ST - ZIP	SEFFNER FL	
TITLE	V	☐ DELETE
NAME	HOWELL, JERRY ALLAN	
STREET ADDRESS	7405 WILLIAM ROAD	
CITY - ST - ZIP	SEFFNER FL	
TITLE	STD	☐ DELETE
NAME	HOWELL, LINDA J.	
STREET ADDRESS	7405 WILLIAMS ROAD	
CITY - ST - ZIP	SEFFNER FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
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	☐ 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	

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

Linda J. Howell **Linda J. Howell**

4/4/96

(813) 971-8148

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Outgoing Phone #

CR2E034 (12/95)