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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

STREET ADDRESS

CITY-ST-ZIP

561484

BURNETT CONTRACTING & DRILLING COMPANY

Principal Place of Business Mailing Address P.O. BOX 5863 P.O. BOX 5863 5833 BRANNEN ROAD WEST 5833 BRANNEN ROAD WEST DO NOT WRITE IN THIS SPACE LAKELAND FL 33607 LAKELAND FL 33807 3. Date Incorporated or Qualified 03/08/1978 2. Principal Place of Business Mailing Address 4, FEI Number Applied For 59-1811646 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 26 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible Yes 24 25 29 30 Personal Property Tax due June 30. g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BYWATER, JOSEPH G 1828 8 FLORIDA AVE 82 Street Address (P.O. Box Number is Not Acceptable) LAKELAND FL 33803 83 64 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 familier 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 reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition PD TITLE 1.1 TITLE **BURNETT, LEONARD** NAME 1.2 NAME 717 WOODHILL DR. STREET ADDRESS 1.3 STREET ADDRESS LAKELAND, FL 00000 CITY-ST-ZIP 14 CITY-ST-7/P DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 City-St-ZiP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 41 TITLE 4. 2 NAME NAME STREET ADORESS **43 STREET ADDRESS** CITY-ST-ZIP 4.4 City-S1-ZIP Change DELETE Addition TITLE 51 THTLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - S1 - ZIP DELETE ☐ Change Addition TITLE 61 TITLE NAME 62 NAME

14. 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 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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

11 - 20 00

FILED

May 11 1998 8:00am

Secretary of State