

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F20770

FILED  
Apr 02, 2004  
Secretary of State

Entity Name: AVERY WELL DRILLING, INC.

## Current Principal Place of Business:

6645 RIDGE RD, SUITE #1  
PORT RICHEY, FL 34668

## New Principal Place of Business:

## Current Mailing Address:

6645 RIDGE RD, SUITE #1  
PORT RICHEY, FL 34668

## New Mailing Address:

FEI Number: 59-2093335

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TORRENCE JR, ALFRED W  
6645 RIDGE ROAD, SUITE ONE  
PORT RICHEY, FL 34668 US

## Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: LORE, CONSTANCE DST4, 1 OR  
Address: 18237 OSHAWA DR.  
City-St-Zip: HUDSON, FL

Title: VDST ( ) Delete  
Name: LORE, CHARLES A,  
Address: 18237 OSHAWA DR.  
City-St-Zip: HUDSON, FL

Title: ST ( ) Delete  
Name: LORE, TRAVIS A  
Address: 6022 HOPE HILL RD  
City-St-Zip: BROOKSVILLE, FL 34601

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: CONSTANCE DST41 OR LORE

PD

04/02/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date