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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Feb 12 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9400002550 (1)

COUNTIES DRILLING CORPORATION

| Principal Place of Business Mailing Address 2290 BUTLER PIKE 2290 BUTLER PIKE | | | | | | | | | |
|---|---|--------------------------------|----------------|------------------------|---|--|--|---------------|---|
| | EETING PA 19462 | PLYMOUTH MEETIN | IG PA 19462-1 | 1436 | | | | | |
| | | | | | | 3. Date Incorporated or Qualified 05/16/1994 | | ite of Last R | leport |
| | lace of Business | 2a. Mailing Addres | s | | , , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | 4. FEI Number | | | oplied For |
| 21 | 21 1 | 26 | | | | 73-1422611 | | | ot Applicable |
| Suite, Apt. #, etc. Suite, Apt. 27 | | | | | | 5. Certificate of Status Desired | | | Additional equired |
| City & Stat | c | City & State | City & State | | | Election Campaign Financing Trust Fund Contribution | | | May Be to Fees |
| Zip 24 | Country 25 | Zıp | 30 | ountry | | This corporation has liability for Florida Statutes | | tax under s | ; 199.032, |
| 1-71 | 9. Name and Address of Cur | | 1991 | \Box | | 10. Name and Address of New R | | | |
| BLA | NTON, EDWIN F | | | 81 | Name | | | | |
| 825 THOMASVILLE ROAD TALLAHASSEE FL 32303 | | | | 82 | Street Ad | dress (P.O. Box Number is Not Accepta | ible) | | <u>,,, , , , , , , , , , , , , , , , , , </u> |
| i inc | EMINOCE IE OZOGO | | | 83 | | | | | |
| | | | | 84 | City | | FL | . 1 ' | Code |
| 11. Pursuant | to the provisions of Sections 607.0 | 0502 and 607.1508, Florida | Statutes, the | above | -named co | rporation submits this statement for the ation's board of directors. I hereby according to the control of the c | purpose of | changing if | ts registered |
| agent. La | registered agent, or both, in the St im familiar with, and accept the ob | ligations of, Section 607.05 | 05, Florida Si | zeo by tatutes | the corpor i. | ation's poard of directors. Thereby according | spr me app | orithent as | . teftisteten |
| SIGNATURE | | | | | | | | | |
| 12, | Signature, typed or printed name of registered OFFICERS | agent and little if applicable | (NOTE Registe | | nt signature req | uired when reinstating) ADDITIONS/CHANGES TO OFF | DATE ICERS AND | DIRECTO | RS IN 12 |
| TITLE | P | DELE | | TITLE | | ADDITIONS/OFF/MOLS TO OFF | OLIIO AITO | Change | Addition |
| NAME | DANELLA, JAMES D | | 1,2 | NAME | Ì | • | | | |
| STREET ADORESS | 2290 BUTLER PIKE | | 1,3 | STREET | address | | | | |
| City-St-ZIP | PLYMOUTH MEETING PA 1 | 9462 | 1,4 | CITY-S | T-21P | | | | |
| TITLE | S | ☐ DELE | TE 2.1 | TITLE | | | | Change | Addition |
| NAME | PIERCE, GINA C | | 2.2 | 2 NAME | | | | | |
| STREET ADDRESS | 2290 BUTLER PIKE | | 2.3 | STREET | ADORESS | | | | |
| C(TY+ST+ZIP | PLYMOUTH MEETING PA 1 | | | 4 CITY - S | T-ZIP | | | <u> </u> | I Laver |
| TITLE | D D D | [DELE | | TITLE | 1 | | | ☐ Change | Addition |
| NAME | DALY, DENNIS P | | | 2 NAME | | | | | |
| STREET ADDRESS | 2290 BUTLER PIKE | 0400 | | | ADDRESS | | | | |
| CITY-ST-ZIP TITLE | PLYMOUTH MEETING PA 1 | 9402 DELE | | 4. CITY - S 1 TITLE | ST - Z(P | | | Change | Addition |
| NAME | | لينا مدد | | 2 NAME | | | | LL Orango | - Planton |
| | | | | | ADDRESS | | | | |
| STREET ADDRESS | | | | 4 CITY - S | 1 | | | | |
| CITY-ST-ZIP TITLE | \ <u>.</u> | DELE | | TITLE | 1- LIF | | ······································ | Change | ☐ Addition |
| NAME | | trial District | | 2 NAME | | | | | |
| STREET ADDRESS | | | | | ADDRESS | | | | |
| CITY-ST-ZIP | | | | 4 CITY-S | | | | | |
| TITLE | | ☐ DELE | | 1 TITLE | . 4.11 | | | Change | Addition |
| NAME | | | | 2 NAME | | | | 0 | |
| STREET ADDRESS | | | | | ADDRESS | | | | |
| DIRET ABDIESS | 1 | | | . Contact | . 501,250 | | | | |

SIGNATURE:

Lam an officer or director of the corporation appears in Block 12 or Block 13 if char.

DENNIS P. DALY/CFD

14. Too hereby certify that the information sup: 3d 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 is applemental 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 of the