

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
 AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

0006074

PROFIT CORPORATION ANNUAL REPORT 1998



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

FILED

98 OCT 20 PM 2:30

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

DOCUMENT # **F95000000922 (3)**

1. Corporation Name

JANCO DIRECTIONAL DRILLING, INC.

Principal Place of Business

10135 GATE PARKWAY
 APT. 506
 JACKSONVILLE FL 32246
 US

Mailing Address

10135 GATE PARKWAY
 APT. 506
 JACKSONVILLE FL 32246
 US

3. Date Incorporated or Qualified

02/24/1995

4. FEI Number

38-2970403

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing

\$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.

Yes

No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

30 Country

9. Name and Address of Current Registered Agent

RUGENSTEIN, ANGELA
 9820 CREEKFRONT RD #811
 JACKSONVILLE FL 32256

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

400002672864--8

-10/26/98--01115--012

****750 PQ 85**79 PSE.00

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP DELETE

PST
 RUGENSTEIN, JANICE T
 4835 11 MILE RD.
 AUBURN MI 48611

TITLE NAME STREET ADDRESS CITY-ST-ZIP DELETE

VP
 RUGENSTEIN, EDWARD SR.
 10135 GATE PARKWAY, APT. 506
 AUBURN MI

TITLE NAME STREET ADDRESS CITY-ST-ZIP DELETE

D
 RUGENSTEIN, PATRICK
 9820 CREEKFRONT ROAD #811
 JACKSONVILLE FL

TITLE NAME STREET ADDRESS CITY-ST-ZIP DELETE

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TITLE NAME STREET ADDRESS CITY-ST-ZIP DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME Change Addition

1.3 STREET ADDRESS Change Addition

1.4 CITY-ST-ZIP Change Addition

2.1 TITLE Change Addition

2.2 NAME Change Addition

2.3 STREET ADDRESS Change Addition

2.4 CITY-ST-ZIP Change Addition

3.1 TITLE Change Addition

3.2 NAME Change Addition

3.3 STREET ADDRESS Change Addition

3.4 CITY-ST-ZIP Change Addition

4.1 TITLE Change Addition

4.2 NAME Change Addition

4.3 STREET ADDRESS Change Addition

4.4 CITY-ST-ZIP Change Addition

5.1 TITLE Change Addition

5.2 NAME Change Addition

5.3 STREET ADDRESS Change Addition

5.4 CITY-ST-ZIP Change Addition

6.1 TITLE Change Addition

6.2 NAME Change Addition

6.3 STREET ADDRESS Change Addition

6.4 CITY-ST-ZIP Change Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(1), 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: *Janice T. Rugenstein* **JANICE T. RUGENSTEIN** OCT 14 1998 (904) 265-2836

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/98)