2005 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 28, 2005 8:00 am Secretary of State **DOCUMENT # F97000006566** 04-28-2005 90159 012 ***150.00 1. Entity Name PETROLEUM. ENGINEERING & CONSTRUCTION COMPANY, INC. Principal Place of Business Mailing Address 1300 E NASHVILLE AVE. 14003039 PO BOX 942 ATMORE, AL 36502 ATMORE, AL 36504 2. Principal Place of Business 3. Mailing Address 207 Ashley Street Suite, Apt. #, etc. Suite, Apt. #, etc. 04252005 CR2E034 (10/03) Cha-P City & State City & State 4. FEI Number Applied For Atmore, AL 63-1017228 Not Applicable 36502 Country Country \$8.75 Additional 5. Certificate of Status Desired Escambia Fee Required 6. Name and Address of Current Registrent Agent 7. Name and Address of New Registered Agent Name Harvey D. White WHITE, BETTY L 1442 SONATA CT Street Address (P.O. Box Number is Not Acceptable) NAVARRE, FL 32566 2116 Pulman Circle Zip Code 32526 City Pensacola 8. 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. I am familiar with, and accept the obligations of registered agent. Harvey D. White SIGNATURE Signature, typed or printed name of registered as (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITI F PDC ☐ Delate TITLE PDC Change WHITE, HARVEY J NAME NAME White, Harvey J. 1865 Old Fannie Road, Flomaton, AL 36441 STREET ADDRESS 1442 SONATA CT. STREET ADDRESS NARVARRE BEACH, FL 32566 CITY-ST-ZIP CITY-ST-ZIP TITLE STD TITLE STD ☐ Delete X Change Addition WHITE, BETTY L NAME NAME White, Betty L. 1865 Old Fannie Road, Flomaton, AL 36441 STREET ADDRESS 1442 SONTA CT STREET ADORESS CITY - ST - ZIP NAVARRE BEACH, FL 32566 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-73P TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS C/TY-ST-ZIP CITY-ST-ZIP 12. 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 report or supplemental 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 co:poration or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if charged, or on an attachment with an address, with all other like empowered.

Harvey J. White

24/25/05

<u>251-446-1577</u>

FILED