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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name K42001

CORE DRILLING PLUS, INC.

## **FILED** Feb 09 1998 8:00am Secretary of State



Mailing Address Principal Place of Business 800 ARDMORE RD 800 ARDMORE RD WEST PALM BEACH FL 33401 WEST PALM BEACH FL 33401 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/28/1988 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 65-0091449 Not Applicable 26 \$8.75 Additional Suite. Apt. #. etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 \$5.00 May Be City & State City & State 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. XYes No Zip Zio Country 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name HOUGH, PATRICK 800 ARDMORE RD Street Address (P.O. Box Number is Not Acceptable) 82 W. PALM BEACH FL 33401 83 84 City 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. DELETE Change Addition 1.1 THILE TITLE HOUGH, PATRICK NAME 1.2 NAME 800 ARDMORE RD 1.3 STREET ADDRESS STREET ADDRESS W. PALM BEACH FL 33401 1.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 2.1 TITLE TITLE **SNIDER, JOHN R** 2.2 NAME NAME 28 RABITS RUN 2.3 STREFT ADDRESS STREET ADDRESS PALM BEACH GARDENS FL 33418 2.4 CITY-ST-ZIP CITY-ST-2IP Change \_\_\_ Addition DELETE 3.1 TITLE TITLE RUSSELL, WILLIAM, 3.2 NAME NAME 5300 ELMHURST DR. #G 3.3 STREET ADDRESS STREET ADDRESS WEST PALM BEACH FL 33415 3.4. CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 4.1 TITLE \$NIDER, SHERRY A 4. 2 NAME NAME 28 RABBITS RUN 4.3 STREET ADDRESS STREET ADDRESS PALM BEACH GARDENS FL 33418 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ DELETÉ 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST - ZIP CITY-ST-ZIP

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