

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

FILED  
May 02 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # K59998 (0)  
1. Corporation Name  
ADVANCE WELL DRILLING AND PUMP SERVICE, INC.



Principal Place of Business  
6440 E. WERNER CT.  
HERNANDO FL 34442

Mailing Address  
6440 E. WERNER CT.  
HERNANDO FL 34442-2411

2. Principal Place of Business  
21 *Werner*  
Suite, Apt. #, etc.  
22 *ABOVE*  
City & State  
23 *ABOVE*  
Zip  
24  
Country  
25  
26  
27  
28  
29  
30 *ABOVE*

3. Date Incorporated or Qualified  
01/23/1989

3a. Date of Last Report  
04/25/1996

4. FEI Number  
59-2938625

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

ROTH, CHARLES ROY  
6440 E. WERNER COURT  
HERNANDO FL 34442

10. Name and Address of New Registered Agent

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
FL 85 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 *Charles Roy Roth*  
Signature, typed or printed name of registered agent and title, if applicable

*C.R. Roth* 4/25/97  
(NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
	D ROTH, CHARLES ROY	6440 E. WERNER CT.	HERNANDO FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY-ST-ZIP	15 DELETE	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

14. I do hereby certify that the information supplied with this filing does not qualify for information indicated on this annual report or supplemental annual report is true and I am an officer or director of the corporation or the receiver or trustee empowered to appear in Block 12 or Block 13 if changed, or on an attachment with an address

Exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the signature stated in this report is true and that my signature shall have the same legal effect as if made under oath, that I executed this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE *C.R. Roth* 4/25/97

CR2E034 (9/96)