

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 04, 2001 8:00 am**
Secretary of State

04-04-2001 90095 019 ***150.00

DOCUMENT # M88448

1. Entity Name

DODGE WELL DRILLING INC.

Principal Place of Business

**% CHARLES DODGE
6312 WYNGLOW LANE
ORLANDO FL 32818**

Mailing Address

**% CHARLES DODGE
6312 WYNGLOW LANE
ORLANDO FL 32818**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-2887224

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

**DODGE, CHARLES
6312 WYNGLOW LANE
ORLANDO FL 32818**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State**10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Delete
	P			<input type="checkbox"/> Delete
	DODGE, CHARLES	6312 WYNGLOW LN.	ORLANDO FL	
	SVP			<input checked="" type="checkbox"/> Delete
	DODGE, JAMES	3802 GROVE ST	WINTER GARDENS FL	
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
	VP			<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
	Dodge James	3802 Grove St	Winter Garden FLA		
	Secretary			<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
	Elizabeth E. Dodge	6312 Wynglow Ln	Orlando Fla 32818		
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Charles Dodge
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**03-31-01**
Date**407-299-8090**
Daytime Phone #

CR2E034 (10/00)