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 # P17151

(2)

FILED Mar 24 1998 8:00am Secretary of State

TRI-ST	ATE DRILLING, INC.					
Principal Place of Business Mailing Address 16940 HWY. 55W 16940 HWY. 55W PLYMOUTH MN 55446 PLYMOUTH MN 55446						T KODINIDUS KUR KIBIKI KERUP KIDUL DIKICI IKUN DIDIL DIDIL DIGAH DIGAH DIGAH DIGAH DIGAH DIGAH DIGAH DIDIL DIGAH D
FEIMOUIN MIN 55440 FEIMOUIN MIN 55440						DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified 12/11/1987
2. Principal P	ace of Business	2a. Mailing Address			4. FEI Number Applied For	
21			26			41-0759924 Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.			SR 75 Additional	
22		27				5. Certificate of Status Desired Fee Required
City & Stat	6	City & State			6. Election Campaign Financing \$5.00 May Be	
23		28				Trust Fund Contribution Added to Fees
Zip	Country	Zip	Cour	itry		8. This corporation owes or has paid the current year Intangible
24	25 29 30 9. Name and Address of Current Registered Agent		30	_		Personal Property Tax due June 30. XY Yes No 10. Name and Address of New Registered Agent
CT	CORPORATION SYSTEM	. 1Bisisian ulanı		81	Name	1A*
1200 S. PINE ISLAND ROAD			[.		A	
	ANTATION FL 33324			82 Street A		Address (P.O. Box Number is Not Acceptable)
			ļī	B3		
			ļ.	84	City	85 Zip Code
			'	•	City	FL S ZIP COUR
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 agen			Agen	nt signature re	required when reinstating) DATE
12.	OF FICERS AND	DELETE	13.	1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
NAME	RIETHMILLER, H. WAYNE			1.2 NAME		Onlings /iLS//iSi
STREET ADDRESS	2712 TERRACEVIEW CT.		1		ADDRESS :	317 Ltl Miss Muffet
CITY-ST-ZIP	PLYMOUTH MN		1.4 CiT1			Key Largo, FL 33037
TITLE	V	DELETE	_	2.1 THILE		☐ Change ☐ Addition
NAME	EISELE, JOYCE		2.2 NAN	2.2 NAME 2.3 STREET ADD		ł
STREET ADDRESS	7036 WEST 113TH ST.		2.3 STR			nd Vac
CITY+ST-ZIP	BLOOMINGTON MN		2. 4 CIT	Y-8 <u>1</u>	T-ZIP	
TITLE	ST	DELETE	3.1 TITL	.E		Change Addition
NAME	MELCHER, ROBERT R.		3.2 NAME			
STREET ADDRESS	309 DIVISION STREET		3.3 STREET		ADDRESS	
CITY-ST-ZIP	BUFFALO MN		3.4. CIT		1-2IP	
TITLE		☐ DELET E	4.1 TITL€			☐ Change ☐ Addition
NAME			4. 2 NAME		- 1	
STREET ADDRESS			4.3 STREET			
CITY-ST-ZIP		DELETE	4.4 CITY-ST-ZIP		- ZIP	☐ Change ☐ Addition
TITLE		☐ ptrtir	1	5.1 TITLE		C Originge Munition
NAME EXPECT ADDRESS			5.2 NAME		ADDRESS	
STREET ADDRESS				5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		☐ DELETE		5.4 CITY-ST-ZIP 6.1 TITLE		☐ Change ☐ Addition
NAME		—	6.2 NAM			
STREET ADDRESS					ADDRESS	\
CITY-ST-ZIP			6.4 CITY			
	ertify that the information supplied wit	h this filing does not qualify for				d 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 Block 12 or Block 13 if changed, or on an attachment with an address.

Robert R. Melcher