

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000076429

1. Entity Name

DE & T DRILLING, INC.

Principal Place of Business

1545 DONNA ROAD
WEST PALM BEACH FL 33409

Mailing Address

1545 DONNA ROAD
WEST PALM BEACH FL 33409

2. Principal Place of Business

6833 Vista Parkway North
Suite, Apt. #, etc.

3. Mailing Address

6833 Vista Parkway North
Suite, Apt. #, etc.

City & State

West Palm Beach, FL

City & State

West Palm Beach, FL

Zip

33411

Country

US

Zip

33411

Country

US

4. FEI Number

65-0613718

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DUDLEY, JANE S
1545 DONNA ROAD
WEST PALM BEACH FL 33409

7. Name and Address of New Registered Agent

Name: Dunkelberger, Douglas S.
Street Address (P.O. Box Number is Not Acceptable): 6833 Vista Parkway North
City: West Palm Beach FL Zip Code: 33411

8. The above named entity signs 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 fee if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

DOUGLAS S. DUNKELBERGER PRES. 4/23/01.

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

TITLE: D
NAME: DUDLEY, JANE S
STREET ADDRESS: 8028 PIONEER RD
CITY-ST-ZIP: WPB FL 33411

TITLE: P
NAME: DUNKELBERGER, DOUGLAS S
STREET ADDRESS: 175 FORESTER CT.
CITY-ST-ZIP: WELLINGTON FL 33414

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

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CITY-ST-ZIP:

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TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE:
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NAME:
STREET ADDRESS:
CITY-ST-ZIP:

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

DOUGLAS S. DUNKELBERGER PRES. 4/23/01

561 689 4299

CR2E034 (10/00)

0288941

FILED
Apr 28, 2001 8:00 am
Secretary of State

04-28-2001 90001 030 ***150.00



DO NOT WRITE IN THIS SPACE