APPROVED AND FILED

03 OCT -7 AM 10:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2003 AMENDED UBR

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000012992

1. Entity Name
COASTAL HORIZONTAL DRILLING, INC.

Principal Place of Business	Mailing Address
1090 N BEAL PKWY FORT WALTON BEACH, FL 32547	1090 N BEAL PKWY FORT WALTON BEACH, FL 32547 US

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

X CHECK HERE IF MAKING CHANGES

4. FEI Number 59-3363174 ☐ 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
HAMILTON, CARL T 15249 N HWY. 331 FREEPORT, FL 32439	Name: JAMES ALLEN HAMILTON Street Address (P.O. Box Number is Not Acceptable): 15249 Hwy 331 City: FREEPORT FL Zip Code: 32439

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: James Allen Hamilton 8/29/03
(Typed or printed name of registered agent and title if applicable. NOTE: Registered Agent's signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P HAMILTON, CARL T 15249 N HWY. 331 FREEPORT, FL	X Delete	P JAMES ALLEN HAMILTON 15249 HWY 331 FREEPORT, FL 32439	☐ Change X Addition
		☐ Delete		☐ Change ☐ Addition
		☐ Delete		☐ Change ☐ Addition
		☐ Delete		☐ Change ☐ Addition
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		☐ Delete		☐ Change ☐ Addition

CR2E034 (10/02)

SD0023611815
10/07/03--01039--001 **61.25

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: James Allen Hamilton 8/29/03 (850) 835-0085
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #