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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT #
1. Corporation Name

P96000059637 (4)

PRECISION DRILLING, INC.

FILED Apr 20 1998 8:00am Secretary of State

Principal Place of Business Mailing Address						C SECURE OF SECURE STATE SECURIOR		******	(() (0)) (0)
	EST HILL BLVD		12773 W FOREST HILL BLVD						
#200 WELLINGTON FL 33414		#200 WELLINGTON FL 33414	#200 WELLINGTON EL 22414			DO NOT WRITE IN THIS SPACE			
US	TE WATE	US				3. Date Incorporated or Qualified			
						07/15/1996			
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number		A	oplied For
21		26				65-068 1093		N	ot Applicable
Suite, Apt. (#, etc.	Suite, Apt. #, etc.	 			5. Certificate of Status Desired	□≭		Additional
City & Chata	· · · · · · · · · · · · · · · · · · ·	Crtu B Conta	City & State						equired
City & State	,		28			6. Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip	Country		Zip Country			Trust Fund Contribution 8. This corporation owes or has pa	id the ours		
24	25	29	30	,		Personal Property Tax due June	_		No I
	9, Name and Address of Curr		11			10. Name and Address of New Re			
MC	DONOUGH, MICHAEL DAVID			B1	Name				
	98 FOREST HILL BOULEVARD)		B2	Street Ade	ress (P.O. Box Number is Not Acceptable)			
SUI	TE 201A								
WE	LLINGTON FL 33414		83						
				84	City		FL	85 Zip	Code
11. Pursuant t	o the provisions of Sections 607.05	502 and 607.1508. Florida Statu	tes, the a	<u>i l</u> bove	a-named co	rooration submits this statement for the r	urpose of	hanging i	ts registered
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 Stignature, typed or profind name of registered agent and blin if applicable (NOTE Registered Agent signature required when reinstating) DATE									
12.		ND DIRECTORS	13.		- K o g ratar a req	ADDITIONS/CHANGES TO OFFIC		DIRECTOR	RS IN 12
TITLE	VP	☐ DELETE	1.1 TI	TLE		P,S, D	1	Change	Addition
NAME	MILLER, MARY K	1.2		AME		Miller, Mary K.			
STREET ADDRESS	1587 STALLION DR			TREET		1587 Stallion Driv	e		
City-St-ZiP	LOXAHATCHEE FL	· · · · · · · · · · · · · · · · ·			T-ZIP	Loxahatchee, FL 33	470		
THTLE	D	☐ DELETE	☐ DELETE 2.1 To				- 3	Change	Addition
NAME	WALKER, EVELYN L		2.2 N			VP, T, D Miller, Nancy L.			
STREET ADDRESS	3381 SW 21 STREET				ADDRESS	146 Lakeside Trail Kinnelon, NJ 07405	6 Lakeside Trail		
CITY-ST-ZIP	FT LAUDERDALE FL	the state of the s			T-ZIP				- Addition
TITLE		f") nere ie	3.1 TI					Change	☐ Addition
NAME CIPTET ADODESS			3.2 N/		ADDDESS				
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP TITLE		☐ DELETE	3.4. C 4.1 TI		1-2IF			Change	Addition
NAME			4.2 N					: ·B4	
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP			4.4 CI						
TITLE		DELETE	51 TI				····	Change	Addition
NAME			52 N	AME				•	
STREET ADDRESS			5 3 ST	REET	ADDRESS				
CITY-ST-ZIP			5.4 CI	TY-\$1	r-zip				
TITLE		DELETE	617/	TLE			I	Change	Addition
NAME			62 N/	AME					
STREET ADDRESS			6.3 ST	REET	ADDRESS				
CITY-ST-ZIP			6.4 C(
14, I hereby co	ertify that the information supplied	with this filing does not qualify f	or the exe	empt	ion stated i	n Section 119.07(3)(i), Florida Statutes. I	further cert	ity 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.

SIGNATURE: