

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000102364 (2)

1. Corporation Name

CONWAY DRILLING AND BLASTING, INC.

FILED

97 OCT 20 AM 10: 06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



REINSTATEMENT 97
DO NOT WRITE IN THIS SPACE

Principal Place of Business

1225 JUSTICE ROAD
COTTONDALE FL 32431

Mailing Address

1225 JUSTICE ROAD
COTTONDALE FL 32431

2. Principal Place of Business

21 314 PINE LANE

Suite, Apt. #, etc.

22

City & State

23 CLEWISTON, FL

Zip

24 33440

Country

25 HENDLY

2a. Mailing Address

26 314 PINE LANE

Suite, Apt. #, etc.

27

City & State

28 CLEWISTON, FL

Zip

29 33440

Country

30 HENDLY

3. Date Incorporated or Qualified

12/18/1996

3a. Date of Last Report

4. FEI Number

59-3415058

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

DAVIS, WANDA G
1225 JUSTICE ROAD
COTTONDALE FL 32431

10. Name and Address of New Registered Agent

81 Name SHERRY CONWAY
82 Street Address (P.O. Box Number is Not Acceptable)
314 PINE LANE
83
84 City CLEWISTON FL 85 Zip Code 33440

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 agent and title, if applicable.

SHERRY CONWAY

(NOTE: Registered Agent signature required when reinstating)

DATE 10/17/97

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME D
STREET ADDRESS CONWAY, DONALD E
CITY-ST-ZIP 1225 JUSTICE ROAD 314 PINE LANE
COTTONDALE FL 32431 CLEWISTON, FL 33440

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ DELETE
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ASST. S/T ☐ Change ☒ Addition
2.2 NAME SHERRY CONWAY
2.3 STREET ADDRESS 314 PINE LANE
2.4 CITY-ST-ZIP CLEWISTON, FL 33440

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS 000002327340--2
3.4 CITY-ST-ZIP -10/22/97--01103--029

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 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:

000002327340--2 DONALD E CONWAY 10/17/97 941-483-4823

CP2E034 (4/97)