2002 UNIFORM BUSINESS REPORT (UBR)

Mar 06, 2002 8:00 am Secretary of State DOCUMENT # P9900001734 1. Entity Name JUST CORE DRILLING, INC. 03-06-2002 90009 018 ***150.00 Principal Place of Business** . . Mailing Address 930 CARTER RD 930 CARTER RD WINTER GARDEN FL 34787 THE STATE OF THE STAT 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. 7 2 1 1 4. FEI Number Applied For City & State City & State 59-3550268 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent _Name WALLACE, BEVERLY Street Address (P.O. Box Number is Not Acceptable) 616 ROBERTS RISE DR. **OCOEE FL 34761** Zip Code City FL 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. Signature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. OFFICERS AND DIRECTORS 11. ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME BURKE, MEREDITH A STREET ADDRESS STREET ADDRESS 616 ROBERTS RISE DR. CITY-ST-ZIP CITY-ST-ZIP **OCOEE FL 34761** ☐ Addition Change ☐ Delete TITLE -TITLE NAME NAME DENUNZIO, BARI S STREET ADDRESS STREET ADDRESS 5253 NW 55 TERRACE CITY-ST-ZIP CITY-ST-ZIP COCONUT CREEK FL 33073 ☐ Addition TITLE _ . Delete ___ TITLE NAME NAME WALLACE, BEVERLY STREET ADDRESS STREET ADDRESS 616 ROBERTS RISE DR CITY-ST-ZIP CITY-ST-ZIP OCOEE FL 34761 ☐ Addition Change ☐ Delete TITLE TITLE VP0 NAME NAMÉ Wallace, Rodney STREET ADDRESS STREET ADDRESS 616 ROBERTS RISE DR CITY-ST-ZIP CITY-ST-ZIP OCOEE FL 34761 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME VAIL, JOHN D STREET ADDRESS STREET ADDRESS 2155 LAKE DEBRA DR.#817 CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32835 ☐ Addition ☐ Delete TITLE Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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.

FILED