

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000026195

1. Entity Name

COREE DRILLING COMPANY

FILED
Jul 07, 2000 8:00 am
Secretary of State

05-16-2000 90803 031 ***150.00

Principal Place of Business

Mailing Address

11303 CLAYTON ROAD
CLERMONT FL 34711

11303 CLAYTON ROAD
CLERMONT FL 34711

2. Principal Place of Business

11303 Clayton Rd

3. Mailing Address

11303 Clayton Rd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Clermont FL

City & State

Clermont FL

4. FEI Number

59-3568278

Applied For

Not Applicable

Zip

34711

Country

Lake

Zip

34711

Country

Lake

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CLAYTON, GEORGE M
11303 CLAYTON ROAD
CLERMONT FL 34711

CLAYTOR
11303

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

11303 CLAYTOR Road

City

Clermont

FL

Zip Code

34711

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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, 2000 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 NAME STREET ADDRESS CITY-ST-ZIP	George M Claytor President 11303 Claytor Rd Clermont, FL 34711	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Donnamarie Claytor 11303 Claytor Rd Clermont FL 34711	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer George M. Claytor 11303 Claytor Rd Clermont, FL 34711	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Donnamarie Claytor 11303 Claytor Rd Clermont, FL 34711	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:

George M. Claytor
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GEORGE M. CLAYTOR

4-11-00

352-374-6103

Date

Daytime Phone #

CR2E034 (9/99)