FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Jan 27 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # S30899 (6)DECKER ENERGY - RIDGE, INC. Principal Place of Business Mailing Address 400 NORTH NEW YORK AVE. 400 NORTH NEW YORK AVE. P O BOX 2397 P O BOX 2397 DO NOT WRITE IN THIS SPACE WINTER PARK FL 32790 WINTER PARK FL 32790 3. Date Incorporated or Qualified 02/08/1991 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 59-3048699 Not Applicable Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing **\$5.00** May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 25 29 30 Personal Property Tax due June 30. ☐ Yes 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WHITING, MACAULEY, JR 400 NORTH NEW YORK AVE 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 101 83 WINTER PARK FL 32790 84 City 85 Zip Code 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE 1.1 TITLE Change __ Addition TITLE PDT MACAULEY, WHITING, JR 1.2 NAME NAME **405 LAKEWOOD DR** STREET ADDRESS 1.3 STREET ADDRESS WINTER PARK FL CITY - ST - ZIP 1.4 CITY - ST - ZIP DELETE Change ___ Addition TITLE 2.1 TITLE WHITING, SARA 2.2 NAME NAME 405 LAKEWOOD DR STREET ADDRESS 2.3 STREET ADDRESS WINTER PARK FL CITY - ST - ZIP 2. 4 CITY-ST-ZIP DELETE Addition TITLE 3.1 TITLE Change NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4,1 TITLE Change Addition NAME 4, 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE Addition TITLE 5,1 TITLE Change 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS

14. 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 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.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

6.1 TITLE 6.2 NAME

SIGNATURE:

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

WASHING THRED

DELETE

407-628-8900

Change

Addition

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