

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Jun 07, 1999 8:00 am  
Secretary of State

06-07-1999 90009 037 \*\*\*550.00

DOCUMENT # V40897

1. Corporation Name

GREG'S WELL DRILLING & IRRIGATION, INC.

Principal Place of Business

4262 BARLOW ROAD  
CRESTVIEW FL 32548

Mailing Address

4262 BARLOW ROAD  
CRESTVIEW FL 32548

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/02/1992

4. FEI Number

59-3125498

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

☒ Yes

☐ No

2. Principal Place of Business

21 4264 BARLOW ROAD

Suite, Apt. #, etc.

2a. Mailing Address

26 4264 BARLOW ROAD

Suite, Apt. #, etc.

City & State

23 CRESTVIEW FL

Zip

24 32536

Country

25 OKALOOSA

City & State

28 CRESTVIEW FL

Zip

29 32536

Country

30 OKALOOSA

9. Name and Address of Current Registered Agent

BAILEY, GREGORY L.  
4262 BARLOW ROAD  
CRESTVIEW FL 32536

10. Name and Address of New Registered Agent

81 Name  
BAILEY, GREGORY L.

82 Street Address (P.O. Box Number is Not Acceptable)  
4264 BARLOW ROAD

83

84 City  
CRESTVIEW

FL

85 Zip Code  
32536

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

5/18/99

OFFICERS AND DIRECTORS

12. TITLE ☐ DELETE

NAME PD  
BAILEY, GREGORY L.  
STREET ADDRESS 4262 BARLOW RD  
CITY-ST-ZIP CRESTVIEW FL 32536

TITLE ☐ DELETE

NAME S  
MCMILLION, FRANCES P  
STREET ADDRESS 703 SHADY LANE  
CITY-ST-ZIP FT WALTON BEACH FL

TITLE ☐ DELETE

NAME S  
BAILEY, TRAVIS L  
STREET ADDRESS 4264 BARLOW RD.  
CITY-ST-ZIP CRESTVIEW FL 32536

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
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

4264 BARLOW ROAD

1.4 CITY-ST-ZIP

CRESTVIEW, FL 32536

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE VP D ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

5/18/99 (850) 864-3658

CR2E034 (1/98)