

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 460725

FILED  
Apr 20, 2011  
Secretary of State

**Entity Name:** TONEY DRILLING SUPPLIES, INC.

**Current Principal Place of Business:**

14060 NW 19TH AVE.  
OPA LOCKA, FL 33054

**New Principal Place of Business:**

**Current Mailing Address:**

14060 NW 19TH AVE.  
OPA LOCKA, FL 33054

**New Mailing Address:**

**FEI Number:** 59-1549284

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

TONEY, JANE W.  
14060 N.W. 19TH AVE.  
OPA LOCKA, FL 330541112 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: TONEY, ROBERT C.  
Address: 14060 NW 19TH AVENUE  
City-St-Zip: MIAMI, FL

Title: C  
Name: TONEY, JANE W.  
Address: 14060 NW 19TH AVENUE  
City-St-Zip: MIAMI, FL

Title: VD  
Name: TONEY, DALE A.  
Address: 3926 PALMARITO ST.  
City-St-Zip: CORAL GABLES, FL 33146

Title: VD  
Name: ROBINSON, TERRY  
Address: 1875 N LEAVITT AVE  
City-St-Zip: ORANGE CITY, FL 32763

Title: VD  
Name: ROBINSON, DARLENE  
Address: 1875 LEAVITT AVE  
City-St-Zip: ORANGE CITY, FL 32763

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: JANE TONEY

C

04/20/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date