
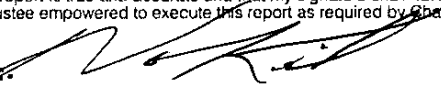


2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By September 7, 2005

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 JUL 12 AM 9:44

DOCUMENT # B02000000213 1. Entity Name TESCO L.P.					
Principal Place of Business 1035 E. HALIENDA BELLVILLE, TX 77418			Mailing Address 1035 E. HALIENDA BELLVILLE, TX 77418		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 74-1850608	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent POSUSTA, WALTER 1275 BELCHEER RD. UNIT 36 DUNEDIN, FL 34698				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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. I am familiar with, and accept the obligations of registered agent.				FL Zip Code	
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
9. Capital Contributions as Shown on record. \$0.00		10. Amount of Capital Contributions in FLORIDA to date. \$0.00		In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.	
A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.					
12. GENERAL PARTNER INFORMATION			13. ADDRESS CHANGES ONLY		
DOCUMENT #	NAME		STREET ADDRESS		
NAME	KIECKE, NORMAN		CITY-ST-ZIP		
STREET ADDRESS	201 DUERN DR		CITY-ST-ZIP		
CITY-ST-ZIP	BELLVILLE, TX 77418		CITY-ST-ZIP		
DOCUMENT #	NAME		STREET ADDRESS		
NAME	ROTHER, DENNIS		CITY-ST-ZIP		
STREET ADDRESS	4910 FIRESTONE DR.		CITY-ST-ZIP		
CITY-ST-ZIP	COLLEGE STATION, TX 77845		CITY-ST-ZIP		
DOCUMENT #	NAME		STREET ADDRESS		
NAME	ROTHER, LARRY		CITY-ST-ZIP		
STREET ADDRESS	3601 MISTY CREEK DR.		CITY-ST-ZIP		
CITY-ST-ZIP	AUSTIN, TX 78735		CITY-ST-ZIP		
DOCUMENT #	NAME		STREET ADDRESS		
NAME			CITY-ST-ZIP		
STREET ADDRESS			CITY-ST-ZIP		
CITY-ST-ZIP			CITY-ST-ZIP		
DOCUMENT #	NAME		STREET ADDRESS		
NAME			CITY-ST-ZIP		
STREET ADDRESS			CITY-ST-ZIP		
CITY-ST-ZIP			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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes					
SIGNATURE: 			Norman Kiecke 7/7/05 (979) 865-3176		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER			Date Daytime Phone #		

STAPLE CHECK HERE

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