

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000003579

Entity Name: TERRAVICI DRILLING SOLUTIONS, INC.

FILED
Feb 25, 2009
Secretary of State

Current Principal Place of Business:

8720A WESTPARK DR.
HOUSTON, TX 77063

New Principal Place of Business:

Current Mailing Address:

C/O STEVE MACKEY, 1437 S. BOULDER AVE.
SUITE 1400
TULSA, OK 741193623

New Mailing Address:

1437 S. BOULDER AVE.
SUITE 1400
TULSA, OK 741193623

FEI Number: 32-0248017

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DCEO () Delete
Name: HELMERICH, HANS
Address: 1437 S. BOULDER AVE., STE. 1400
City-St-Zip: TULSA, OK 741193623

Title: DP () Delete
Name: SCHAAF, STUART
Address: 8720A WESTPARK DR.
City-St-Zip: HOUSTON, TX 77063

Title: VP () Delete
Name: DE RIJK, MICHAEL
Address: 8720A WESTPARK DR.
City-St-Zip: HOUSTON, TX 77063

Title: SDEV () Delete
Name: MACKEY, STEVEN R.
Address: 1437 S. BOULDER AVE., STE. 1400
City-St-Zip: TULSA, OK 741193623

Title: DTEV () Delete
Name: FEARS, DOUGLAS
Address: 1437 S. BOULDER AVE., STE. 1400
City-St-Zip: TULSA, OK 741193623

Title: DEVP () Delete
Name: ORR, M. ALAN
Address: 1437 S. BOULDER AVE. STE. 1400
City-St-Zip: TULSA, OK 741193623

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: SHEDD, CLIFF
Address: 8720A WESTPARK DR.
City-St-Zip: HOUSTON, TX 77063

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DOUGLAS E. FEARS

Electronic Signature of Signing Officer or Director

DTEV

02/25/2009

Date