## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G89651

Entity Name: WIGGINS BROTHERS WELL DRILLING, INC.

FILED Apr 27, 2006 Secretary of State

US

**Current Principal Place of Business: New Principal Place of Business:** 

22024 STATE ROAD 46 22024 STATE ROAD 46 P.O. BOX 1314 SORRENTO, FL 32776

SORRENTO, FL 32776

**New Mailing Address: Current Mailing Address:** 

22024 STATE ROAD 46 PO BOX 1314

SORRENTO, FL 32776 P.O. BOX 1314 US SORRENTO, FL 32776 US

FEI Number: 59-2486326 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

WIGGINS, RUTH WIGGINS, GREGORY O V 32399 WHEATFIELD RD 22024 SR 46

MOUNT DORA, FL 32757 US SORRENTO, FL 32776 US

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: GREGORY O. WIGGINS 04/27/2006

> Electronic Signature of Registered Agent Date

> > City-St-Zip:

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

SORRENTO, FL

City-St-Zip:

SORRENTO, FL 32776

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition WIGGINS, RUTH WIGGINS, RUTH A P Name: Name: 32399 SCENIC HILLS DR 32399 SCENIC HILLS DR Address: Address:

City-St-Zip: MOUNT DORA, FL 32757 City-St-Zip: MOUNT DORA, FL 32757

Title: VΡ Title: () Delete (X) Change ( ) Addition WIGGINS, GREG. Name: Name: WIGGINS, GREGORY O V P.O. BOX 429 NA P.O. BOX 429 Address: Address:

Title: Title: (X) Change ( ) Addition ( ) Delete

WIGGINS, KEVIN, WIGGINS, SAMUEL K ST Name: Name: 39943 CR 452 15701 ACORN CIRCLE Address: Address: City-St-Zip: LEESBURG, FL 34788 City-St-Zip: TAVARES, FL 32778

I hereby certify that the information supplied with this filing does not qualify for the 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: GREGORY O. WIGGINS 04/27/2006 ٧