

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G89651

FILED  
Apr 28, 2008  
Secretary of State

Entity Name: WIGGINS BROTHERS WELL DRILLING, INC.

## Current Principal Place of Business:

22024 STATE ROAD 46  
SORRENTO, FL 32776 US

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 1314  
SORRENTO, FL 32776 US

## New Mailing Address:

FEI Number: 59-2486326

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

WIGGINS, GREGORY O V  
22024 SR 46  
SORRENTO, FL 32776 US

## Name and Address of New Registered Agent:

WIGGINS, GREGORY O P  
22024 SR 46  
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

04/28/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: WIGGINS, GREGORY O P  
Address: P.O. BOX 429  
City-St-Zip: SORRENTO, FL 32776

Title: V ( ) Delete  
Name: WIGGINS, RUTH A V  
Address: 32399 SCENIC HILLS DR.  
City-St-Zip: MT. DORA, FL 32757

Title: ST ( ) Delete  
Name: WIGGINS, SAMUEL K ST  
Address: 15701 ACORN CIRCLE  
City-St-Zip: TAVARES, FL 32778

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: GREGORY O. WIGGINS

P

04/28/2008

Electronic Signature of Signing Officer or Director

Date