

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# G89651

**FILED**  
**Apr 12, 2011**  
**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 P  
22024 SR 46  
SORRENTO, FL 32776 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: P  
Name: WIGGINS, GREGORY O P  
Address: P.O. BOX 429  
City-St-Zip: SORRENTO, FL 32776

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

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

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: GREGORY O WIGGINS

P

04/12/2011

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

\_\_\_\_\_  
Date