


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2006 08:00 AM
Secretary of State

DOCUMENT # J42090	
1. Entity Name RODGERS DRILLING SERVICE, INC.	

Principal Place of Business RT. 4 BOX 1007 P.O. BOX 430773 BIG PINE KEY, FL 33043	Mailing Address P O BOX 430773 BIG PINE KEY, FL 33043-0773 US
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02152006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2744015	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fees Required
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6. Name and Address of Current Registered Agent WRIGHT, THOMAS D. 10095 OVERSEAS HIGHWAY SUITE 10 MARATHON, FL 33050
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**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

000000468343
03/24/06-80025-019 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD RODGERS, LAIR 245 BLACKBEARD ROAD LITTLE TORCH KEY, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD RODGERS, BARBARA 245 BLACKBEARD ROAD LITTLE TORCH KEY, FL
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Lair H. Rodgers **3-11-06 (305) 872-4403**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #