

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K55602

FILED
Jan 06, 2006
Secretary of State

Entity Name: SICKLE WELL DRILLING, INC.

Current Principal Place of Business:

24601 SW 123RD AVENUE
PRINCETON, FL 33032

New Principal Place of Business:

Current Mailing Address:

24601 SW 123RD AVENUE
PRINCETON, FL 33032

New Mailing Address:

FEI Number: 65-0089717

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADAIR, PERRY
EMERALD LAKE CORP PARK
3111 STIRLING ROAD
FORT LAUDERDALE, FL 333126525 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: PD () Delete
Name: SICKLE, KARL,
Address: 24601 S.W. 123 AVENUE
City-St-Zip: PRINCETON, FL 33032

Title: ST () Delete
Name: SICKLE, ELEANOR B.,
Address: 24601 S.W. 123 AVENUE
City-St-Zip: PRINCETON, FL 33032

Title: V () Delete
Name: SICKLE, RUSSELL A
Address: 24601 SW 123 AV
City-St-Zip: HOMESTEAD, FL 33032

Title: V () Delete
Name: SICKLE, STEVE
Address: 24601 SW 123RD AVENUE
City-St-Zip: PRINCETON, FL 33032

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:

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

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: KARL SICKLE

PRES

01/06/2006

Electronic Signature of Signing Officer or Director

Date