2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K89200

Entity Name: DRILLING CONSULTANTS, INC.

FILED Feb 14, 2006 Secretary of State

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

11505 NORTH GRADY AVENUE 1930 LAND O' LAKES BLVD. TAMPA, FL 336241715

SUITE #15

LUTZ, FL 33549

Current Mailing Address: New Mailing Address:

P.O. BOX 271723 TAMPA, FL 33688

FEI Number: 59-2951542 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ZIEGLER, SONYA P ZIEGLER, SONYA P 11505 NORTH GRADY AVENUE 1930 LAND O' LAKES BLVD. TAMPA, FL 336241715 US SUITE #15

LUTZ, FL 33549 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: SONYA P. ZIEGLER 02/14/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDC () Delete Title: PDC (X) Change () Addition ZIEGLER, SONYA P., ZIEGLER, SONYA P., Name: Name:

11505 N. GRADY AVE P.O. BOX 271723 Address: Address: City-St-Zip: TAMPA, FL City-St-Zip: TAMPA, FL 33688

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

ZIEGLER, JOHN B., Name: ZIEGLER, JOHN B., 11505 N. GRADY AVE P.O. BOX 271723 Address: Address: TAMPA, FL 33688 City-St-Zip: TAMPA, FL City-St-Zip:

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

ZIEGLER, WILLIAM C. ZIEGLER, WILLIAM C Name: Name: 11505 N. GRADY AVE. P.O. BOX 271723 Address: Address: City-St-Zip: TAMPA, FL City-St-Zip: TAMPA, FL 33688

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

ZIEGLER, WILLIAM B ZIEGLER, WILLIAM B Name: Name: Address: 11505 N. GRADY AVENUE Address: P.O. BOX 271723 City-St-Zip: City-St-Zip: TAMPA, FL TAMPA, FL 33688

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: ZONYA P. ZIEGLER **PDC** 02/14/2006