

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K89200

FILED  
Feb 08, 2007  
Secretary of State

Entity Name: DRILLING CONSULTANTS, INC.

## Current Principal Place of Business:

1930 LAND O' LAKES BLVD.  
SUITE #15  
LUTZ, FL 33549

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 271723  
TAMPA, FL 33688

## New Mailing Address:

P.O. BOX 2772  
LUTZ, FL 33548

FEI Number: 59-2951542

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ZIEGLER, SONYA P.  
1930 LAND O' LAKES BLVD.  
SUITE #15  
LUTZ, FL 33549 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: PDC ( ) Delete  
Name: ZIEGLER, SONYA P.,  
Address: P.O. BOX 271723  
City-St-Zip: TAMPA, FL 33688

Title: V ( ) Delete  
Name: ZIEGLER, JOHN B.,  
Address: P.O. BOX 271723  
City-St-Zip: TAMPA, FL 33688

Title: VSD ( ) Delete  
Name: ZIEGLER, WILLIAM C  
Address: P.O. BOX 271723  
City-St-Zip: TAMPA, FL 33688

Title: VD ( ) Delete  
Name: ZIEGLER, WILLIAM B  
Address: P.O. BOX 271723  
City-St-Zip: TAMPA, FL 33688

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDC (X) Change ( ) Addition  
Name: ZIEGLER, SONYA P.,  
Address: P.O. BOX 2772  
City-St-Zip: LUTZ, FL 33548

Title: V (X) Change ( ) Addition  
Name: ZIEGLER, JOHN B.,  
Address: P.O. BOX 2772  
City-St-Zip: LUTZ, FL 33548

Title: VSD (X) Change ( ) Addition  
Name: ZIEGLER, WILLIAM C  
Address: P.O. BOX 2772  
City-St-Zip: LUTZ, FL 33548

Title: VD (X) Change ( ) Addition  
Name: ZIEGLER, WILLIAM B  
Address: P.O. BOX 2772  
City-St-Zip: LUTZ, FL 33548

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: SONIA P. ZIEGLER

PDC

02/08/2007

Electronic Signature of Signing Officer or Director

Date