## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## 08-31-2005 90065 018 \*\*\*\*55.00 **DOCUMENT # L04000029130** 09-12-2005 90121 042 \*\*\*\*\*5.00 DAN MC GUIRE WELL DRILLING LLC Principal Place of Business Mailing Address 4571 DAVID DR P.O. BOX 1055 BARTOW, FL 33830\_ EAGLE LAKE, FL 33839 US 3. Mailing Address P.O. Box 1055 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 08092005 Chg-LLC CR2E083 (10/03) City & State Applied For eki FL Not Applicable \$5.00 Additional 3 PoLK ehK 5. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Dan mc MC'GUIRE, DAN Street Address (P.O. Box Number is Not Acceptable) 4571 DAVID DR BARTOW FL, FL 38830 Zip Code 3 3820 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 the obligations of registered agent. Dan mo Duis DAN ME Guits Filing Fee is \$50.00 Due by September 7, 2005 Make check payable to Florida Department of State \* MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES 9. IIILE MGR ☐ Delete TITLE Change ☐ Addition MC GURIE, DAN NAME NAME STREET ADDRESS 4571 DAVID DR STREET ADDRESS CITY -ST-ZIP CITY+ST-7IP BARTOW, FL 33830 ☐ Delete TITLE TITLE Change ☐ Addition HALE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7P ☐ Delete IIILE Change Addition MALA MALKE STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete mF Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-57-21P CITY-ST-ZP Delete ■ Addition MILE Change TITLE HAVE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report is true and occurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

Sep 12, 2005 8:00 am Secretary of State



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood

4-11-1937

Secretary of State

September 1, 2005

34-2055-881

DAN MC GUIRE WELL DRILLING LLC P.O. BOX 1055 EAGLE LAKE, FL 33839 US

Subject: DAN MC GUIRE WELL DRILLING LLC

Reference Number:

L04000029130

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$55.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

TO AVOID THE ADMINISTRATIVE DISSOLUTION/REVOCATION, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 6478, TALLAHASSEE, FLORIDA 32314 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/LS ANNUAL REPORTS SECTION