## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000107601

Address:

City-St-Zip:

WINTER SPRINGS, FL 32708

Entity Name: AMERDRILL DIRECTIONAL, LLC

**FILED** Mar 20, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1708 STOCKPORT STREET WINTER SPRINGS, FL 32708 **Current Mailing Address: New Mailing Address:** 1708 STOCKPORT STREET WINTER SPRINGS, FL 32708 FEI Number: 20-3736533 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WAGNER, GARY 1708 STOCKPORT STREET WINTER SPRINGS, FL 32708 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete WAGNER, GARY Name: Name: Address: 1708 STOCKPORT STREET Address: City-St-Zip: WINTER SPRINGS, FL 32708 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: LEE, RICHARD Name: Address: 1708 STOCKPORT STREET Address: City-St-Zip: WINTER SPRINGS, FL 32708 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition BARTH, SEAN Name: Name: 1708 STOCKPORT STREET

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 is true and accurate and that my electronic 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.

Address:

City-St-Zip:

SIGNATURE: SEAN BARTH **MGRM** 03/20/2006