

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000050605

Entity Name: GLOBAL DRILLING, LLC

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

4509 GEORGE ROAD
200
TAMPA, FL 33634 US

New Principal Place of Business:

4509 GEORGE ROAD
TAMPA, FL 33634 US

Current Mailing Address:

4509 GEORGE ROAD
200
TAMPA, FL 33634 US

New Mailing Address:

4509 GEORGE ROAD
TAMPA, FL 33634 US

FEI Number: 26-0153108

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JANSSEN, DUANE H
1626 38TH AVENUE NORTH
ST. PETERSBURG, FL 33713 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

MANAGING MEMBERS/MANAGERS:

Title: MGRP () Delete
Name: MELE, JEREMY
Address: 4509 GEORGE ROAD, SUITE 200
City-St-Zip: TAMPA, FL 33634 US

Title: VPS () Delete
Name: DUPRE, IRV
Address: 1206 GOLF MEADOW BLVD.
City-St-Zip: VALRICO, FL 33594

Title: T () Delete
Name: JANSSEN, DUANE H
Address: 1626 38TH AVENUE NORTH
City-St-Zip: ST. PETERSBURG, FL 33713

ADDITIONS/CHANGES:

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 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.

SIGNATURE: DUANE H JANSSEN

T

04/30/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date