

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005373

FILED  
Feb 06, 2005  
Secretary of State

**Entity Name:** SILK AND SABLE MOUNTED DRILL TEAM INC.

**Current Principal Place of Business:**

3065 HATTON ST  
SARASOTA, FL 34237

**New Principal Place of Business:**

13005 M & J ROAD  
MYAKKA CITY, FL 34251

**Current Mailing Address:**

3065 HATTON ST  
SARASOTA, FL 34237

**New Mailing Address:**

13005 M & J ROAD  
MAYKKA CITY, FL 34251

**FEI Number:** 46-7133948

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BROOKER, MARK  
3065 HATTON ST  
SARASOTA, FL 34237 US

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

BROOKER, MARK  
13005 M & J ROAD  
MYAKKA CITY, FL 34251 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: MARK BROOKER

02/06/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: BROOKER, MARK  
Address: 3065 HATTON ST  
City-St-Zip: SARASOTA, FL 34237

Title: VPD ( ) Delete  
Name: WILLIAMS, JEANETTE  
Address: 16021 WINBURN DR.  
City-St-Zip: SARASOTA, FL 34240

Title: D ( ) Delete  
Name: WILLIAMS, MELODEE  
Address: 16021 WINBURN DR.  
City-St-Zip: SARASOTA, FL 34240

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: BROOKER, MARK  
Address: 13005 M & J ROAD  
City-St-Zip: MYAKKA CITY, FL 34251

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 for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARK BROOKER

PD

02/06/2005

Electronic Signature of Signing Officer or Director

Date