## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000109008

Entity Name: TONEY DRILLING SUPPLIES CENTRAL, INC.

FILED May 01, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 5 NORTH BEST POINT 14060 NW 19TH AVENUE MIAMI, FL 33054 INVERNESS, FL 344501452 **Current Mailing Address: New Mailing Address:** 14060 NW 19TH AVE MIAMI, FL 33054 FEI Number: 27-0055845 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TONEY, JANE W 14060 NW 19 AVE US MIAMI, FL 33054 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 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete () Change () Addition TONEY, JANE W Name: Name: 14060 NW 19TH AVE. Address: Address: City-St-Zip: MIAMI, FL City-St-Zip: Title: DP Title: () Delete () Change () Addition Name: TONEY, ROBERT C Name: 14060 NW 19TH AVE. Address: Address: City-St-Zip: MIAMI FI City-St-Zip: Title: Title: VD ( ) Delete () Change () Addition TONEY, DALE A Name: Name: 3926 PALMARITO ST. Address: Address: City-St-Zip: CORAL GABLES, FL 33146 City-St-Zip: Title: VD ( ) Delete Title: () Change () Addition ROBINSON, TERRY Name: Name: Address: 1875 N. LEAVITT AVE. Address: City-St-Zip: ORANGE CITY, FL 32763 City-St-Zip: Title: VD Title: () Delete () Change () Addition ROBINSON, DARLENE Name: Name: 1875 N. LEAVITT AVE. Address: Address: City-St-Zip: ORANGE CITY, FL 32763 City-St-Zip:

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: JANE W TONEY C 05/01/2006