

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90986 001 ***150.00

14015383



01192005 Chg-P CR2E034 (10/03)

DOCUMENT # P04000096096 1. Entity Name SUNSHINE STATE DRILLING, INC.			
Principal Place of Business 2291 MORNING GLORY TRAIL SPRING HILL, FL 34606		Mailing Address 2291 MORNING GLORY TRAIL SPRING HILL, FL 34606	
2. Principal Place of Business 15904 Olney Lane Suite, Apt. #, etc.		3. Mailing Address 15904 Olney Lane Suite, Apt. #, etc.	
City & State Spring Hill, FL		City & State Spring Hill, FL	
Zip 34610		Zip 34610	
Country PASCO		Country PASCO	
4. FEI Number 201283611		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HUNSAKER, MARK 2291 MORNING GLORY TRAIL SPRING HILL, FL 34606		7. Name and Address of New Registered Agent Name Mark Hunsaker Street Address (P.O. Box Number is Not Acceptable) 15904 Olney Lane City Spring Hill FL Zip Code 34610	
B. 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 with, and accept the obligations of registered agent.			
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE D NAME MEYER, SHARON STREET ADDRESS 2291 MORNING GLORY TRAIL CITY-ST-ZIP SPRING HILL, FL 34606	<input type="checkbox"/> Delete	TITLE V NAME Mark Hunsaker STREET ADDRESS 15904 Olney Lane CITY-ST-ZIP Spring Hill, FL 34610	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE D NAME HUNSAKER, MARK STREET ADDRESS 2291 MORNING GLORY TRAIL CITY-ST-ZIP SPRING HILL, FL 34606	<input type="checkbox"/> Delete	TITLE P NAME President Mark Hunsaker STREET ADDRESS 15904 Olney Lane CITY-ST-ZIP Spring Hill, FL 34610	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE D NAME GRAY, MICHELLE STREET ADDRESS 2291 MORNING GLORY TRAIL CITY-ST-ZIP SPRING HILL, FL 34606	<input type="checkbox"/> Delete	TITLE TS NAME Treas Sec. Michelle Gray STREET ADDRESS 15904 Olney Lane CITY-ST-ZIP Spring Hill, FL 34610	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP 	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP 	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP 	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. 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 or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <u>Michelle L Gray</u> <u>Sec. Treas.</u>		Date <u>1-19-05</u> Daytime Phone # <u>727-8566813</u>	