

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 24, 2006 8:00 am**  
**Secretary of State**

04-24-2006 90436 040 \*\*\*158.75

<b>DOCUMENT # P04000096096</b> 1. Entity Name <b>SUNSHINE STATE DRILLING, INC.</b>					
Principal Place of Business <b>15904 OLCY LANE SPRING HILL, FL 34610</b>			Mailing Address <b>15904 OLCY LANE SPRING HILL, FL 34610</b>		
2. Principal Place of Business <b>6220 Fronda Ave</b> <small>Suite, Apt. #, etc.</small>		3. Mailing Address <b>6220 Fronda Ave</b> <small>Suite, Apt. #, etc.</small>			
City & State <b>NORTH PORT, FL</b> <small>Zip</small> <b>34286</b> <small>Country</small> <b>Sarasota</b>		City & State <b>NORTH PORT, FL</b> <small>Zip</small> <b>34286</b> <small>Country</small> <b>Sarasota</b>		4. FEI Number <b>20-1283611</b>	
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent  <b>HUNSAKER, MARK 15904 OLCY LANE SPRING HILL, FL 34610</b>			7. Name and Address of New Registered Agent Name <b>MARK HUNSAKER</b> Street Address (P.O. Box Number is Not Acceptable) <b>6220 Fronda Ave</b> City <b>NORTH PORT</b> <b>FL</b> <small>Zip Code</small> <b>34286</b>		
8. 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 <u><i>Mark Hunsaker</i></u> <span style="float: right;">DATE <b>4-19-06</b></span> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MEYER, SHARON 2291 MORNING GLORY TRAIL SPRING HILL, FL 34606 <input checked="" 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	P HUNSAKER, MARK 15704 OLCY LANE SPRING HILL, FL 34610 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>6220 Fronda Ave North Port, FL 34286</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GRAY, MICHELLE 15904 OLCY LANE SPRING HILL, FL 34610 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>6220 Fronda Ave North Port, FL 34286</b> <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 exemptions contained 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 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><i>Michelle R Gray</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date <b>4-19-06</b> Daytime Phone # <b>941-429-5996</b>		