2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2008
Secretary of State

DOCUMENT# P99000078214

Entity Name: FULL BORE DIRECTIONAL, INC.

Current Principal Place of Business:

4921 15TH AVE SOUTH
GULFPORT, FL 33707

New Principal Place of Business:

Current Mailing Address:

4921 15TH AVE SOUTH
GULFPORT, FL 33707

New Mailing Address:

FEI Number: 59-3597601 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MENDEZ, ROBERT M
12864 GORDA CIRCLE WEST
LARGO, FL 33773 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: MENDEZ, ROBERT M
Address: 12864 GORDA CIRCLE WEST
City-St-Zip: LARGO, FL 33773

Title: VP ( ) Delete
Name: EARIC, CHRISTOHER P
Address: 1875 WATEROAK DR WEST
City-St-Zip: CLEARWATER, FL 33764

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: ROBERT MENDEZ P 04/17/2008

Electronic Signature of Signing Officer or Director Date