

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 27, 2006 8:00 am
Secretary of State

02-27-2006 90089 026 ***150.00

DOCUMENT # V64740

1. Entity Name

E. L. BRYANT WELL DRILLING, INC.



Principal Place of Business

C/O LOWRY & WATSON, CPA
133 HOSIPTAL DR NE
FT. WALTON BEACH FL 32548

Mailing Address

C/O LOWRY & WATSON, CPA
133 HOSIPTAL DR NE
FT. WALTON BEACH FL 32548



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3141849

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E034 (10/05)

6. Name and Address of Current Registered Agent

BRYANT, E. L.
1557 HWY 98 WEST
MARY ESTHER FL 32569

7. Name and Address of New Registered Agent

Name

Edward LeVon Bryant

Street Address (P.O. Box Number is Not Acceptable)

1120 Hospital Road

Fort Walton Beach, FL 32547

City

FL

Zip Code

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

Edward L. Bryant

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

2/17/06

FILE NOW!!! FEE IS \$150.00.
After May 1, 2006 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD ☒ Delete
NAME BRYANT, E. L.
STREET ADDRESS 1557 HWY 98 WEST
CITY-ST-ZIP MARY ESTHER FL 32569

TITLE ST ☒ Delete
NAME BRYANT, JESSIE A
STREET ADDRESS 1557 HWY 98 W
CITY-ST-ZIP MARY ESTHER FL 32569

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE President ☐ Change ☒ Addition
NAME Edward LeVon Bryant
STREET ADDRESS 1120 Hospital Road
CITY-ST-ZIP Fort Walton Beach, FL 32547

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Edward L. Bryant

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/17/06

Date

Daytime Phone #