

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
May 08 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P93000008841 (7)**

1. Corporation Name
SEPTIC AND SEWER, INC.



Principal Place of Business 17550 CAPPER LANE ESTERO FL 33928	Mailing Address 17550 CAPPER LANE ESTERO FL 33928-9525
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 01/29/1993		3a. Date of Last Report 05/01/1996	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 65-0392800		Applied For Not Applicable	
22	City & State	27	City & State	5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No			

9. Name and Address of Current Registered Agent CASTER, DAVID J 17550 CAPPER LANE ESTERO FL 33928				10. Name and Address of New Registered Agent			
				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE:

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	P	☐ DELETE		1.1 TITLE	☐ Change	☐ Addition	
NAME	CASTER, DAVID J.			1.2 NAME			
STREET ADDRESS	17550 CAPPER LANE			1.3 STREET ADDRESS			
CITY-ST-ZIP	ESTERO FL			1.4 CITY-ST-ZIP			
TITLE	V	☐ DELETE		2.1 TITLE	☐ Change	☐ Addition	
NAME	WARNER, JIMMY R.			2.2 NAME			
STREET ADDRESS	17550 CAPPER LANE			2.3 STREET ADDRESS			
CITY-ST-ZIP	ESTERO FL			2.4 CITY-ST-ZIP			
TITLE	ST	☐ DELETE		3.1 TITLE	☐ Change	☐ Addition	
NAME	CASTER, JANET A			3.2 NAME			
STREET ADDRESS	17550 CAPPER LANE			3.3 STREET ADDRESS			
CITY-ST-ZIP	ESTERO FL			3.4 CITY-ST-ZIP			
TITLE		☐ DELETE		4.1 TITLE	☐ Change	☐ Addition	
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		☐ DELETE		5.1 TITLE	☐ Change	☐ Addition	
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		☐ DELETE		6.1 TITLE	☐ Change	☐ Addition	
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY-ST-ZIP			

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Janet A. Caster* 4-30-97 841-485-8488

CR2E034 (9/96)