


2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F01324 1. Entity Name MCNEILL SEPTIC TANK COMPANY, INC.						FILED <div style="font-size: 1.2em;">07 JUL 12 PM 1:54</div> SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business P.O. BOX 6123 TALLAHASSEE, FL 32314				Mailing Address P.O. BOX 6123 TALLAHASSEE, FL 32314			
2. Principal Place of Business - No P.O. Box # 6709 Visalia Place				3. Mailing Address Suite, Apt. #, etc.			
Suite, Apt. #, etc.				Suite, Apt. #, etc.			
City & State Tallahassee, FL				City & State			
Zip 32317		Country Leon		Zip		Country	
4. FEI Number 59-2030482				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 MCNEILL, RENEE C 6709 VISALIA PL TALLAHASSEE, FL 32311				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 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 <u><i>Renee C McNeill</i></u> <small>Signature, typed or printed name of registered agent and title if applicable</small>				DATE <u>7-12-07</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.							
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MCNEILL, MICHAEL E. 6709 VISALIA PLACE TALLAHASSEE, FL 32311 <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <div style="font-size: 1.2em; text-align: center;">400106642394</div> <div style="font-size: 1.2em; text-align: center;">07/24/07--01055--007 **150.00</div>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST MCNEILL, RENEE C 6709 VISALIA PL TALLAHASSEE, FL 32311 <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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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>Renee C McNeill</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				Date <u>7-12-07</u> <small>Daytime Phone #</small>			