

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 17, 2005 8:00 am
Secretary of State

03-17-2005 90017 008 ***150.00

DOCUMENT # F06400			
1. Entity Name DAMPIER SEPTIC TANK, INC.			
Principal Place of Business 7030 NW 23RD WAY GAINESVILLE FL 32653 US		Mailing Address 7030 NW 23RD WAY GAINESVILLE FL 32653 US	
2. Principal Place of Business 7030 NW 23rd Way		3. Mailing Address 7030 NW 23rd Way	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Gainesville, FL		City & State Gainesville, FL	
Zip 32653	Country Alachua	Zip 32653	Country Alachua
6. Name and Address of Current Registered Agent DAMPIER, BETTY 7030 N.W. 23RD WAY GAINESVILLE FL 32653		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>Betty Dampier</u> <u>Betty Dampier</u> 3-15-05 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD DAMPIER, BETTY 7030 N.W. 23RD WAY GAINESVILLE FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP DAMPIER, WILBUR A 7030 N.W. 23RD WAY GAINESVILLE FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV- DAMPIER, BRENDA JEAN 7030 N.W. 23RD WAY GAINESVILLE FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DAMPIER, FREDDIE A 7030 NW 23RD WAY GAINESVILLE FL 32653 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. I 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 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>Betty Dampier</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		3-15-05 352-378-2659 Date Daytime Phone #	