## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

### **DOCUMENT # G71984** A & L SEPTIC TANK PRODUCTS, INC. Principal Place of Business Mailing Address 9304 EAST COLONIAL DRIVE P.O. BOX 677878

ORLANDO, FL 32817

ANDERSON, ROGER D.

9304 EAST COLONIAL DRIVE ORLANDO, FL 32817

**FILED** Apr 11, 2006 8:00 am Secretary of State

03-27-2006 90256 027 \*\*\*158.00 04-11-2006 90113 003 \*\*\*\*\*\*.75

60026698

## DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

ORLANDO, FL 32867

4. FEI Number 59-2348971

01242006

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

No Chg-P

		<i></i>		
8. The above named eating submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Flonda. I am famillar with, and eccept the obligations of registered agent.  SIGNATURE  SIGNATURE  STATE Agent approach types or period name of registered agent and the a explication.  (NOTE Registered agent, or both, in the State of Flonda. I am famillar with, and eccept the obligations of registered agent, or both, in the State of Flonda. I am famillar with, and eccept the obligations of registered agent, or both, in the State of Flonda. I am famillar with, and eccept the obligations of registered agent, or both, in the State of Flonda. I am famillar with, and eccept the obligations of registered agent.  SIGNATURE  SIGNATURE				
FILE NOWIN FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		Election Campaign Finan Trust Fund Contribution.	scing \$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ANDERSON, ROGER D PRESIDE 9304 EAST COLONIAL DR ORLANDO, FL 32817		DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD ANDERSON, ROGER M-VD 9304 EAST COLONIAL DR ORLANDO, FL 32817			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TS ANDERSON, PATRICIA A TS 9304 EAST COLONIAL DR ORLANDO, FL 32817			
MALIE	Sec. Knderson, Kathryn M. Sec 9304 E. Colonial Dr.	•		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Orlando, Fl. 32867			
NAME STREET ADDRESS CUTY-ST-7IP				

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 eath; 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.

# ATTACHMENT

#G71984

The Bank shorted the previous check by.75%. The check\* was 10876 for \$158,00 when it should & been \$158.75