2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Apr 19, 2007 8:00 am
Secretary of State
03-23-2007 90171 032 ****50.00

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1st MOORE CR2E083 (10/06)

DOCUMENT # L06000034609

1. Entity Name
ATP DEWATERING, LLC

Principal Place of Business	Mailing Address
1100 UNIVERSITY PARKWAY SUITE 21 SARASOTA FL 34234 US	1100 UNIVERSITY PARKWAY SUITE 21 SARASOTA FL 34234 US

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
7301 W. Country Club Dr. N.	7301 W. Country Club Dr. N.
Suite, Apt. #, etc.: 207	Suite, Apt. #, etc.: 207
City & State: Sarasota, Florida	City & State: Sarasota, Florida
Zip: 34243 Country: U.S.A.	Zip: 34243 Country: U.S.A.

4. FEI Number: 20-4635741 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MARUNYAK, DAMON
1100 UNIVERSITY PARKWAY
SUITE 21
SARASOTA FL 34234

7. Name and Address of New Registered Agent

Name: Donald J. Swete
Street Address (P.O. Box Number is Not Acceptable): 7301 W. Country Club Dr. N. #207
City: Sarasota FL Zip Code: 34243

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: Donald J. Swete 3-14-07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $50.00
Make Check Payable to Florida Department of State
Due By May 1, 2007

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Registered Agent Damon Marunyak 1100 University Parkway, Suite 21 Sarasota, FL 34234 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Managing Member Donald J. Swete 7301 W. Country Club Dr. N. #207 Sarasota, Fla. 34243 ☒ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Donald J. Swete Donald J. Swete 3-14-07 941-351-1301
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #