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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M86709

(6)

A-ABE SEPTIC TANK SERVICE, INC.

FILED Feb 17 1997 8:00am Secretary of State

Addition

Change

Principal Place of Business 2805 S.R. 60 WEST PO BOX 812 MULBERRY FL 33860-9445		Mailing Address 2805 S.R. 60 WEST PO BOX 812 MULBERRY FL 33860-0812		4 JABITARE IN I I MAN WINE I BALL MAND CAN A	'IBII BIDIE DIRIE DIRIE DIDIE	16011 1001		
					3. Date Incorporated or Qualified 06/23/1988	3a. Date of Last Re 03/27/1996	eport	
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Ap	optied For	
21 26		4					ot Applicable	
Suite, Apt. #, etc 22 2		Suite, Apt. #, etc.	27		5. Certificate of Status Desired	\$8.75 A		
City & Stat	e	City & State	State		8. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip 24	Country 25			У	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No			
	9. Name and Address of Currer				10. Name and Address of New Registered Agent			
, GRAINGER, LLOYD M.				1 Name	*			
3490 OLD HWY 60 MULBERRY FL 33860			8:	Street Address (P.O. Box Number is Not Acceptable)				
			8:	83				
				4 City		85 Zip (Code	
agent. I a	registered agent, or both, in the state am familiar with, and accept the oblig	ations of, Section 607.0505, Flo	orida Statute	9 s .	ation's board of directors. I hereby acception is board of directors.	DATE DATE	registered	
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	☐ DELÆTE	1.1 TITLE			Change	Addition	
NAME	GRAINGER, LLOYD MAYO SR		1.2 NAMI	:)			ĺ	
STREET ADDRESS	T ADDRESS 3490 OLD HWY 60, P.O. BOX 713			et address				
City-St-Zip	MULBERRY FL		1.4 CITY-	-ST-ZIP				
TIFLE	VD	☐ DELETE	2.1 TITLE			☐ Change	Addition	
NAME			2.2 NAMI					
STREET ADDRESS	3490 OLD HWY 60		23 STAE	et address				
CITY-ST-ZIP	MULBERRY FL			-ST - ZIP		AL.		
TITLE	Į	DELETE	3.1 TITLE	į		Change	Addition	
NAME.			3.2 NAMI					
STREET ADDRESS				ET ADDRESS			ļ	
CITY-ST-ZIP			3.4. City 4.1 Title			Change	Addition	
NAME		M precit	4.1 III £	1		m Augusta	radiioil	
STREET ADDRESS			1	ET ADDRESS				
CITY-ST-ZIP			4.3 SINE		•			
TITLE		DELETE	5.1 TITLE			☐ Change	Addition	
ı	1			1	· ·			

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.

6.4 City-ST-ZIP

5.2 NAME

6.1 TITLE

62 NAME 6.3 STREET ADDRESS

DELETE

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY- ST-ZIP

CITY - ST - ZIP