

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000031325

Entity Name: ABLE DEWATERING INC.

FILED
Jan 21, 2005
Secretary of State

Current Principal Place of Business:

POST OFFICE BOX 3516
PLANT CITY, FL 33563 US

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 3516
PLANT CITY, FL 33563 US

New Mailing Address:

FEI Number: 59-3637654

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHEFFIELD, THOMAS G
2529 TURKEY CREEK ROAD
PLANT CITY, FL 33566 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: SABIN, ROBERT B
Address: 4003 TYSON AVENUE
City-St-Zip: TAMPA, FL 33611

Title: P () Delete
Name: SHEFFIELD, THOMAS G
Address: 2529 TURKEY CREEK ROAD
City-St-Zip: PLANT CITY, FL 33566

Title: ST () Delete
Name: SHEFFIELD, BRENDA K
Address: 2529 TURKEY CREEK ROAD
City-St-Zip: PLANT CITY, FL 33566

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS G. SHEFFIELD

P

01/21/2005

Electronic Signature of Signing Officer or Director

Date