

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jul 11, 2008 8:00 am**  
**Secretary of State**

07-11-2008 90019 007 \*\*\*150.00

**DOCUMENT # P02000022104**

1. Entity Name  
**CHILDERS AND SON, INC.**



Principal Place of Business  
**4481 INDUSTRIAL PARK RD.  
GREEN COVE SPRINGS, FL 32043**

Mailing Address  
**4481 INDUSTRIAL PARK RD.  
GREEN COVE SPRINGS, FL 32043**

**40110411**



01202006 No Chg-P CF2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**01-0649702**

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

Applied For  
Not Applicable

6. Name and Address of Current Registered Agent

**CHILDERS, ROY KEITH**  
**1762 OAK GROVE DR**  
**GREEN COVE SPRINGS, FL 32043**

*4481 Industrial Park Rd*

**DO NOT WRITE  
IN THIS SPACE**

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 agents.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Signature, typed or printed name of registered agent and city & state. (NOTE: Registered Agent Signature required when renewing)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$350.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be  
Added to Fee

**10. OFFICERS AND DIRECTORS**

TITLE	DPT
NAME	CHILDERS, ROY KEITH
STREET ADDRESS	1762 OAK GROVE DR
CITY-ST-ZIP	GREEN COVE SPRINGS, FL 32043
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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 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 the empowered.

SIGNATURE: \_\_\_\_\_

Signature and Office of Principal Place of Business of Officer or Director

ATTACHMENT

40110411

2<sup>ND</sup> REQUEST

CHILDERS SEPTIC INC.  
4481 INDUSTRIAL PARK ROAD  
GREEN COVE SPRINGS, FL 32043

JUNE. 01ST, 2008

TO: LEAH R. GABLE

RE: REF#PO2000022104

I CALLED THE PHONE NUMBER ON YOUR LETTER AND SPOKE WITH GERALDINE. SHE STATES THAT NOTHING IS WRONG WITH OUR REPORT AND THAT OUR CHECK HAS BEEN RECEIVED. WILL YOU PLEASE CHECK AND MAKE SURE THAT EVERYTHING IS OK. I DO NOT WANT TO HAVE ANY PROBLEMS WITH THIS DOWN THE ROAD. IF YOU HAVE ANY QUESTIONS PLEASE CONTACT US AT 904-276-0332. I CHANGED THE ADDRESS AND I HAVE NO IDEA WHAT IS WRONG WITH THIS REPORT. SOMEONE PLEASE CALL ME AND LET ME KNOW WHATS GOING ON WITH THIS.

SINCERELY,

ROY CHILDERS  
PRESIDENT/OWNER

ATTACHMENT

40110411

#PO2000022104

MAY. 01ST, 2008

CHILDERS SEPTIC INC.  
4481 INDUSTRIAL PARK ROAD  
GREEN COVE SPRINGS, FL 32043

TO: LEAH R. GABLE

RE: REF#PO2000022104

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SINCERELY,



ROY CHILDERS  
PRESIDENT/OWNER