2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2008
Secretary of State

DOCUMENT# P04000100687

Entity Name: ACCURATE SEPTIC & PLUMBING SERVICES, INC.

Current Principal Place of Business:

4120 SELVITE RD
FORT PIERCE, FL 34981

New Principal Place of Business:

4120 SELVITZ RD
FORT PIERCE, FL 34981

Current Mailing Address:

4120 SELVITE RD
FORT PIERCE, FL 34981

New Mailing Address:

4120 SELVITZ RD
FORT PIERCE, FL 34981

FEI Number: 20-1513609 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BAKER, JOHN L
4120 SALVITE RD
FORT PIERCE, FL 34981 US

Name and Address of New Registered Agent:

BAKER, JOHN L
4120 SELVITZ RD
FORT PIERCE, FL 34981 US

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: DAVID WHITESIDE 04/08/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: VP ( ) Delete
Name: BAKER, JOHN
Address: 4120 SELVITE RD
City-St-Zip: FORT PIERCE, FL 34981

Title: T ( ) Delete
Name: WHITESIDE, DAVID E
Address: 4120 SALVIR RD
City-St-Zip: FORT PIERCE, FL 34981

Title: P ( ) Delete
Name: WHITESIDE, STEPHANIE
Address: 4120 SELVITE RD
City-St-Zip: FORT PIERCE, FL 34981

Title: S ( ) Delete
Name: BAKER, DONNA L
Address: 4120 SELVITE RD
City-St-Zip: FORT PIERCE, FL 34981

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition
Name: BAKER, JOHN
Address: 4120 SELVITZ RD
City-St-Zip: FORT PIERCE, FL 34981

Title: T (X) Change ( ) Addition
Name: WHITESIDE, DAVID E
Address: 4120 SELVITZ RD
City-St-Zip: FORT PIERCE, FL 34981

Title: P (X) Change ( ) Addition
Name: WHITESIDE, STEPHANIE
Address: 4120 SELVITZ RD
City-St-Zip: FORT PIERCE, FL 34981

Title: S (X) Change ( ) Addition
Name: BAKER, DONNA L
Address: 4120 SELVITZ RD
City-St-Zip: FORT PIERCE, FL 34981

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: DAVID WHITESIDE T 04/08/2008
Electronic Signature of Signing Officer or Director Date