2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000112475

City-St-Zip: HAINES CITY, FL 338451843

Entity Name: A QUALITY SEPTIC SERVICE, INC.

FILED Feb 08, 2009 Secretary of State

Entity Nar	ne: A QUALI	TY SEPTIC SERVICE, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
604 HWY. 17/92 NORTH HAINES CITY, FL 33844				12111 JIM EDWARDS RAOD HAINES CITY, FL 33844	
Current Mailing Address:			New Mailing Address	New Mailing Address:	
P.O. BOX: HAINES C	3568 ITY, FL 33845				
FEI Number:	20-3304086	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
MOBLEY, JANE A 604 HWY. 17/92 NORTH HAINES CITY, FL 33844 US			MOBLEY, JANE A 12111 JIM EDWARDS HAINES CITY, FL 338	MOBLEY, JANE A 12111 JIM EDWARDS ROAD HAINES CITY, FL 33844 US	
	named entity see of Florida.	submits this statement for the p	purpose of changing its registered	d office or registered agent, or both,	
SIGNATURE: JANE ANN MOBLEY				02/08/2009	
	Electror	ic Signature of Registered Ag	ent	Date	
Election Car	npaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	VDS () MOBLEY, JANE P.O. BOX 1843 HAINES CITY, I		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	PDT () MOBLEY, DAR P.O. BOX 1843		Title: Name: Address:	() Change () Addition	

City-St-Zip:

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: JANE ANN MOBLEY VP 02/08/2009