## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000096600

Entity Name: WENDY'S SEPTIC SERVICE, INC.

FILED Apr 23, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
3599 23RD AVENUE SOUTH SUITE 8 LAKE WORTH, FL 33461 US	1416 BETA CIR LAKE CLARKE SHORES, FL 33406 US
Current Mailing Address:	New Mailing Address:
P.O. BOX 15667 WEST PALM BEACH, FL 33416 US	
FEI Number: 20-5306460 FEI Number Applied For (	) FEI Number Not Applicable ( ) Certificate of Status Desired ( )
Name and Address of Current Registered Ager	nt: Name and Address of New Registered Agent:
SAMMARCO, VINCENT T ESQ 1408 S. ANDREWS AVENUE FORT LAUDERDALE, FL 33316 US	
The above named entity submits this statement for in the State of Florida.	r the purpose of changing its registered office or registered agent, or both,
SIGNATURE:	
Electronic Signature of Registere	ed Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition KANE, KHORI S KANE, RAYMOND S Name: Name: 3599 23RD AVENUE SOUTH, STE 8 Address: 1416 BETA CIR Address: City-St-Zip: LAKE WORTH, FL 33461 US City-St-Zip: LAKE CLARKE SHORES, FL 33406 US

Title: VP (X) Delete Title: ( ) Change ( ) Addition

 Name:
 KANE, NICHOLAS S
 Name:

 Address:
 48 PALMETTO DR
 Address:

 City-St-Zip:
 KEY WEST, FL 33040 US
 City-St-Zip:

Title: SEC ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 KANE, RAYMOND S
 Name:

 Address:
 1416 BETA CIRCLE
 Address:

 City-St-Zip:
 LAKE CLARKE SHORES, FL 33406 US
 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: RAYMOND S. KANE PD 04/23/2008