2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000030453

Entity Name: T. DISNEY & R. CREWS SEPTICS, INC.

FILED Mar 28, 2009 Secretary of State

Current Princip	al Place of Business:	New Princip	al Place of Business

1621 N. TAMIAMI TR. 210 N INDUSTRIAL LOOP

SUITE 2 SUITE B

N. FORT MYERS, FL 33903 LABELLE, FL 33935

Current Mailing Address: New Mailing Address:

1621 N. TAMIAMI TRAIL PO BOX 1348
SUITE 2 LABELLE EL 33

SUITE 2 LABELLE, FL 33975 N. FORT MYERS, FL 33903

FEI Number: 20-8452098 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DISNEY, TODD S PRES

1621 N. TAMIAMI TRAIL

SUITE 2

N. FORTH MYERS, FL 33903 US

CREWS, CAROL S PRES

210 N INDUSTRIAL LOOP
SUITE B

LABELLE, FL 33935 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: CAROL S. CREWS 03/28/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name:
 DISNEY, TODD S
 Name:
 CREWS, CAROL S

 Address:
 9381 MAPLE LANE
 Address:
 4018 OAK HAVEN DR

 City-St-Zip:
 NORTH FORT MYERS, FL 33917 US
 City-St-Zip:
 LABELLE, FL 33935 US

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

 Name:
 CREWS, ROBERT L
 Name:
 CREWS, ROBERT L

 Address:
 P.O. BOX 1348
 Address:
 4018 OAK HAVEN DR

 City-St-Zip:
 LABELLE, FL 33975 US
 City-St-Zip:
 LABELLE, FL 33935 US

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

 Name:
 DISNEY, STEPHEN D
 Name:

 Address:
 1366 WEEPING WILLOW CT
 Address:

 City-St-Zip:
 CAPE CORAL, FL 33909 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: CAROL S. CREWS P 03/28/2009