

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000086473

FILED
Feb 28, 2008
Secretary of State

Entity Name: AAA AFFORDABLE SEPTIC SERVICES INC

Current Principal Place of Business:

28665 JACKS BRANCH ROAD, SW
LABELLE, FL 33935

New Principal Place of Business:

2745 W JACKS BRANCH RD.
LABELLE, FL 33935

Current Mailing Address:

28665 JACKS BRANCH ROAD, SW
LABELLE, FL 33935

New Mailing Address:

2745 W. JACKS BRANCH RD.
LABELLE, FL 33935

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

WILSON, THOMAS E
28665 JACKS BRANCH ROAD, SW
LABELLE, FL 33935 US

Name and Address of New Registered Agent:

WILSON, THOMAS E
2745 W. JACKS BRANCH RD.
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: _____

02/28/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WILSON, THOMAS E
Address: 28665 JACKS BRANCH ROAD, SW
City-St-Zip: LABELLE, FL 33935

Title: VP () Delete
Name: WILSON, CYNTHIA A
Address: 28665 JACKS BRANCH ROAD, SW
City-St-Zip: LABELLE, FL 33935

Title: TREA () Delete
Name: WILSON, THOMAS E
Address: 28665 JACKS BRANCH ROAD, SW
City-St-Zip: LABELLE, FL 33935

Title: SEC () Delete
Name: WILSON, CYTHINA A
Address: 28665 JACKS BRANCH ROAD, SW
City-St-Zip: LABELLE, FL 33935

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WILSON, THOMAS E
Address: 2745 W. JACKS BRANCH RD.
City-St-Zip: LABELLE, FL 33935

Title: VP (X) Change () Addition
Name: WILSON, CYNTHIA A
Address: 2745 W. JACKS BRANCH RD.
City-St-Zip: LABELLE, FL 33935

Title: TREA (X) Change () Addition
Name: WILSON, THOMAS E
Address: 2745 W. JACKS BRANCH RD.
City-St-Zip: LABELLE, FL 33935

Title: SEC (X) Change () Addition
Name: WILSON, CYTHINA A
Address: 2745 W. JACKS BRANCH RD.
City-St-Zip: LABELLE, FL 33935

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: CYNTHIA A WILSON

VPS

02/28/2008

Electronic Signature of Signing Officer or Director

Date