



**FILED**  
**Apr 16, 2003 8:00 am**  
**Secretary of State**

04-16-2003 90116 031 \*\*\*150.00

**2003 FOR PROFIT CORPORATION  
 UNIFORM BUSINESS REPORT (UBR)**

<b>DOCUMENT # P93000043670</b>		10074470	
1. Entity Name <b>A*B WATERWORKS, INC.</b>			
Principal Place of Business RT. 3, BOX 42 GREENVILLE, FL 32331 US		Mailing Address RT. 3, BOX 42 GREENVILLE, FL 32331 US	
2. Principal Place of Business <b>346 GREEN MEADOWS Rd</b>		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State <b>Monticello, FL</b>		City & State	
Zip <b>32344</b>		Country <b>USA</b>	
4. FEI Number <b>59-3205547</b>		Applied For Not Applicable	
5. Certificate of Status Desired: <input type="checkbox"/>		\$5.75 Additional Fee Required	
6. Name and Address of Current Registered Agent <b>BELOW, ALLEN C 346 GREEN MEADOWS RD. MONTICELLO, FL 32344</b>		7. Name and Address of New Registered Agent	
Name		Street Address (P.O. Box Number is Not Acceptable)	
City		FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent Signature required when electing)</small>		DATE	
		9. Election Campaign Financing Trust Fund Contribution: <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	P <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>BELOW ALLEN C</b>	NAME	
STREET ADDRESS	<b>346 GREEN MEADOWS RD</b>	STREET ADDRESS	
CITY-ST-ZIP	<b>MONTICELLO, FL 32344</b>	CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <b>Allen C. Below</b>		DATE: <b>04/15/03</b>	
<small>Signature typed or printed name of signing officer or director</small>		<small>DATE</small>	

CR28264 (10/02)

Attachment

10074470

:: NOTICE ::

# P93000043670

**CHANGE OF ADDRESS**

**A\*B WATERWORKS INC.**

**OLD ADDRESS: RT 3 BOX 42, GREENVILLE, FL  
32331**

**NEW ADDRESS: 346 GREEN MEADOWS ROAD  
MONTICELLO, FL 32344  
850-997-6814**

Allen C. Below, President

