2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000007861

Entity Name: AA SEPTIC PUMPING, INC.

FILED Mar 11, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business	Current Principal Place of Business:	New Principal Place of Business
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8442 W BEAVER ST JACKSONVILLE, FL 32220

Current Mailing Address: New Mailing Address:

8442 W BEAVER ST JACKSONVILLE, FL 32220

FEI Number: 59-3450840 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:

JOYNER, JOSEPH JOYNER, SANDRA G
135 BULLS BAY HWY
135 BULLS BAY HWY
14 CKSONNILLE FL 2000

JACKSONVILLE, FL 32220 US JACKSONVILLE, FL 32220 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: SANDRA G JOYNER 03/11/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: JOYNER, SANDRA Name: JOYNER, SANDRA G

 Name:
 JOYNER, SANDRA
 Name:
 JOYNER, SANDRA G

 Address:
 135 BULLS BAY HWY
 Address:
 135 BULLS BAY HIGHWAY

 City-St-Zip:
 JACKSONVILLE, FL 32220
 City-St-Zip:
 JACKSONVILLE, FL 32220

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

 Name:
 JOYNER, MADLYN L
 Name:

 Address:
 135 BULLS BAY HWY
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32220
 City-St-Zip:

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

 Name:
 JOYNER, JOSEPH
 Name:
 JOYNER, BILLY W

 Address:
 135 BULLS BAY HWY
 Address:
 1162 PEBBLE RIDGE DR.

 City-St-Zip:
 JACKSONVILLE, FL 32220
 City-St-Zip:
 JACKSONVILLE, FL 32220

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SANDRA G JOYNER P 03/11/2005