


2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 22, 2004 8:00 am
Secretary of State

03-22-2004 90038 007 ***150.00


DOCUMENT # P99000050342	
1. Entity Name A-1 WATER SYSTEMS, INC.	

Principal Place of Business 603 RUSS RD. FT. PIERCE FL 34982	Mailing Address 603 RUSS RD. FT. PIERCE FL 34982
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2. Principal Place of Business 3338 ENTERPRISE RD. FT. PIERCE, FL	3. Mailing Address P.O. Box 12985 FT. PIERCE, FL
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City & State 34982 U.S.A.	City & State 34979 U.S.A.
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54020945



MOORE CR2E034 (11/03)

4. FEI Number 65-0925443	Applied For <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	Not Applicable <input type="checkbox"/>

6. Name and Address of Current Registered Agent WHITE, DENNIS J 603 RUSS RD. FT. PIERCE FL 34982	
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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 *Dennis J. White* DATE *2-20-2004*

Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WHITE, DENNIS J 603 RUSS RD. FT. PIERCE FL 34982 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P.O. BOX 12985 FT. PIERCE, FL 34979 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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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 files empowered.

SIGNATURE: *Dennis J. White* DATE *2-20-2004* (772) 464-4782

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR