

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000081894

FILED  
Apr 07, 2004  
Secretary of State

Entity Name: ABNEY WATER SYSTEMS, INC.

## Current Principal Place of Business:

4893 W. WATERS AVENUE #E  
TAMPA, FL 33634

## New Principal Place of Business:

## Current Mailing Address:

4893 W. WATERS AVENUE #E  
TAMPA, FL 33634

## New Mailing Address:

FEI Number: 59-3598809

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DRUMMOND, TEMPLE H  
C/O KASS, SHULER, ET. AL.  
1505 NORTH FLORIDA AVENUE  
TAMPA, FL 33602 US

## Name and Address of New Registered Agent:

MAIN, ALASTAIR D MR  
4893 W. WATERS AVE.  
SUITE E  
TAMPA, FL 33634 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: ALASTAIR D. W. MAIN

04/07/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: ABNEY, MICHAEL A  
Address: 5734 IMPERIAL KEY  
City-St-Zip: TAMPA, FL 33615

Title: D ( ) Delete  
Name: ALASTAIR D. W. MAIN,  
Address: 4893 W. WATERS AVENUE #E  
City-St-Zip: TAMPA, FL 33634

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: ABNEY, MICHAEL A  
Address: 4893 W. WATERS AVE. SUITE E  
City-St-Zip: TAMPA, FL 33634

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ALASTAIR D. W. MAIN

D

04/07/2004

Electronic Signature of Signing Officer or Director

Date