## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# V39590

FILED Feb 21, 2006 Secretary of State

Entity Name: RICK FERRELL'S CERTIFIED A & A SEPTIC SERVICE, INC.

Current F	Principal Place	of Business:	New Principal Place	of Business:
	INA LILY DR RT RICHEY, FL	34652		
Current N	lailing Addres	s:	New Mailing Addres	ss:
	INA LILY DR RT RICHEY, FL	34652		
FEI Numbei	r: 59-3132070	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	d Address of C	urrent Registered Agent:	Name and Address of	of New Registered Agent:
9020 RAN SUITE 10	'E, RUSSELL G ICHO DEL RIO 1 RT RICHEY, FL	DRIVE		
The above	e named entity s		ourpose of changing its registere	ed office or registered agent, or both,
The above n the Stat	e named entity s e of Florida.		ourpose of changing its registere	ed office or registered agent, or both,
The above	e named entity s e of Florida. RE:			ed office or registered agent, or both,  Date
The above n the Stat SIGNATU	e named entity s e of Florida. RE: Electron	submits this statement for the p		
The above n the Stat SIGNATU	e named entity s e of Florida. RE: Electron	submits this statement for the particle in the particle in Signature of Registered Agonature of Registered Agonature fund Contribution ( ).	ent	
The above n the Stat SIGNATU	e named entity se of Florida.  RE:  Electron  mpaign Financing  S AND DIRECT  DPS () FERRELL, RICH 4329 CANNA LIII	ic Signature of Registered Age Trust Fund Contribution ( ).  TORS:  Delete XY D	ent	Date
The above n the Stat SIGNATU  Election Ca  OFFICER  Title:  Name:  Address:	e named entity se of Florida.  RE:  Electron  mpaign Financing  S AND DIRECT  DPS () FERRELL, RICH 4329 CANNA LII NEW PORT RICH  DV () FERRELL, SHA 4329 CANNA LII	ic Signature of Registered Age  Trust Fund Contribution ( ).  TORS:  Delete (Y D LY DR CHEY, FL 34652  Delete RON	ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

I hereby certify that the information supplied with this filing does not qualify for the 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: SHARON FERRELL DV 02/21/2006