

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Oct 16, 2007
Secretary of State**

DOCUMENT# G60156

Entity Name: A-ABLE SEPTIC-SEWER SERVICE, INC.

Current Principal Place of Business:

2190 N. CREDE AVENUE
CRYSTAL RIVER, FL 34428 US

New Principal Place of Business:

Current Mailing Address:

2190 N. CREDE AVENUE
CRYSTAL RIVER, FL 34428 US

New Mailing Address:

FEI Number: 59-2326040 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOOKER, WILLIAM R
2190 N. CREDE AVE
CRYSTAL RIVER, FL 34428 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: HOOKER, WILLIAM R
Address: 2190 N. CREDE AVENUE
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: TSD () Delete
Name: HOOKER, WILLIAM R
Address: 2190 N. CREDE AVENUE
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: PD () Delete
Name: RUBIN, MICHAEL D
Address: 2190 N. CREDE AVENUE
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: VPD (X) Delete
Name: ST. CLAIR, RICHARD W
Address: 2190 N. CREDE AVENUE
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: VP () Delete
Name: BUCKINGHAM, HAROLD G
Address: 2190 N. CREDE AVENUE
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: VP () Delete
Name: BUCKINGHAM, MICHAEL
Address: 2190 N. CREDE AVENUE
City-St-Zip: CRYSTAL RIVER, FL 34428

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: PD (X) Change () Addition
Name: ST. CLAIR, RICHARD W
Address: 2190 N. CREDE AVENUE
City-St-Zip: CRYSTAL RIVER, FL 34428

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: RICHARD W. ST. CLAIR

P

10/16/2007

Electronic Signature of Signing Officer or Director

Date