FILED

Secretary of State

03-10-1999 90130 039 ***150.00

Mar 10, 1999 8:00 am

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F13056

1. Corporation Name

BURNEY SEPTIC TANK SERVICE, INC.

Principal Place of Business Mailing Address C/O JACKSON B BURNEY C/O JACKSON B BURNEY 24 PELLICER LANE 24 PELLICER LANE ST AUGUSTINE FL 32095-4129 DO NOT WRITE IN THIS SPACE ST AUGUSTINE FL 32095-4129 3. Date Incorporated or Qualifed 12/30/1980 2. Principal Place of Business 4. FEI Number Mailing Address Applied For 2a. 59-2043897 Not Applicable 21 26 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country Zip Country This corporation owes the current year Intangible X Yes □ No 30 Personal Property Tax. 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BURNEY, JACKSON B. Street Address (P.O. Box Number is Not Acceptable) 24 PELLICER LANE ST AUGUSTINE FL 83 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. □ DELETE Change ☐ Addition TITLE PD 1.1 TITLE BURNEY, JACKSON B 1.2 NAME NAME 24 PELLICER LANE STREET ADDRESS 1.3 STREET ADDRESS ST AUGUSTINE FL CITY-ST-ZIP 1.4 CITY-ST-ZIP Change Addition ☐ DELETE **VPS** TITLE 21 TITLE BURNEY, EDISON M 2.2 NAME NAME 24 PELLICER LANE STREET ADDRESS 2.3 STREET ADDRESS ST AUGUSTINE FL CITY-ST-ZIP 2.4 CITY-ST-ZIP Addition Change DELETE TITLE 3.1 TITLE BURNEY, EDISON M NAME 3.2 NAME 24 PELLICER LN STREET ADDRESS 3.3 STREET ADDRESS ST. AUGUSTINE FL CITY-ST-ZIP 3.4. CITY-ST-ZIP ☐ DELETE Change Addition TITLE 41 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIF TITLE DELETE 5.1 TITLE ☐ Change ☐ Addition 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE DELETE Change Addition

14. 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 annual report or supplemental annual 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 13 if changed, or on an attachment with an address, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

CR2E034 (11/98)