

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**SECRETARY OF STATE**  
**DIVISION OF CORPORATIONS**

95 JAN 26 PM 3: 19

DOCUMENT # **P25863** (2)

1. Corporation Name  
**SVERDRUP ENVIRONMENTAL, INC.**

DO NOT WRITE IN THIS SPACE.

Principal Place of Business Mailing Address  
**13723 RIVERPORT DR** **13723 RIVERPORT DR**  
**MARYLAND HGTS MO 63043** **MARYLAND HGTS MO 63043**  
**US** **US**

3. Date Incorporated or Qualified **08/29/1989** 3a. Date of Last Report **02/08/1994**  
4. FEI Number **43-1494558** Applied For  Not Applicable   
5. Certificate of Status Desired  **\$8.75 Additional Fee Required**  
6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**  
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes  Yes  No

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip Country 28 Zip Country  
24 25 29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM**  
**1200 S. PINE ISLAND ROAD**  
**PLANTATION FL 33324**

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City **FL** 85 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 re-registering.

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>CD</b>	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>SMITH, BRICE R.</b>	1.2 NAME	
STREET ADDRESS	<b>15 FIELDING ROAD</b>	1.3 STREET ADDRESS	
CITY - ST - ZIP	<b>ST LOUIS MO</b>	1.4 CITY - ST - ZIP	
TITLE	<b>PD</b>	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>SCHWARTZ, HENRY G., JR.</b>	2.2 NAME	
STREET ADDRESS	<b>10 DEERFIELD</b>	2.3 STREET ADDRESS	
CITY - ST - ZIP	<b>ST LOUIS MO</b>	2.4 CITY - ST - ZIP	
TITLE	<b>S</b>	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>MORISSON, A S</b>	3.2 NAME	
STREET ADDRESS	<b>12150 BENT BROOK</b>	3.3 STREET ADDRESS	
CITY - ST - ZIP	<b>ST LOUIS MO 63131</b>	3.4 CITY - ST - ZIP	
TITLE	<b>V</b>	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>BUESCHER, ALFRED J.</b>	4.2 NAME	
STREET ADDRESS	<b>624 GOLFVIEW DRIVE</b>	4.3 STREET ADDRESS	
CITY - ST - ZIP	<b>BALLWIN MO</b>	4.4 CITY - ST - ZIP	
TITLE	<b>VD</b>	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>KREIKEMEIER, KRAIG G.</b>	5.2 NAME	
STREET ADDRESS	<b>80 WEBSTER WOODS</b>	5.3 STREET ADDRESS	
CITY - ST - ZIP	<b>ST LOUIS MO</b>	5.4 CITY - ST - ZIP	
TITLE	<b>T</b>	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>WEHRLE, THOMAS E.</b>	6.2 NAME	
STREET ADDRESS	<b>34 RED OAK DRIVE</b>	6.3 STREET ADDRESS	
CITY - ST - ZIP	<b>HIGHLAND IL</b>	6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 12 or Block 13, changed, or on an attachment with an address.

SIGNATURE:

*Thomas E. Wehrle*  
SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR  
**T.E. WEHRLE**

1/10/95 314-770-4770  
DATE (Typed Name #)