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**Jan 27 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # P25863 (2)
1. Corporation Name
SVERDRUP ENVIRONMENTAL, INC.



Principal Place of Business: **13723 RIVERPORT DR MARYLAND HGTS MO 63043 US**
Mailing Address: **13723 RIVERPORT DR MARYLAND HGTS MO 63043-4819 US**

3. Date Incorporated or Qualified: **08/29/1989**
3a. Date of Last Report: **01/31/1996**
4. FEI Number: **43-1494558**
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: **21**
2a. Mailing Address: **26**
Suite, Apt. #, etc.: **22**
City & State: **27**
City & State: **23**
Zip: **24** Country: **25**
Zip: **29** Country: **30**

9. Name and Address of Current Registered Agent
**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent
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: _____ (NOTE: Registered Agent signature required when re-stating) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	SCHWARTZ, HENRY G., JR.	
STREET ADDRESS	10 DEERFIELD	
CITY - ST - ZIP	ST LOUIS MO	
TITLE	S	<input checked="" type="checkbox"/> DELETE
NAME	MORISSON, A S	
STREET ADDRESS	12150 BENT BROOK	
CITY - ST - ZIP	ST LOUIS MO 63131	
TITLE	V	<input type="checkbox"/> DELETE
NAME	BUESCHER, ALFRED J.	
STREET ADDRESS	624 GOLFVIEW DRIVE	
CITY - ST - ZIP	BALLWIN MO	
TITLE	VD	<input checked="" type="checkbox"/> DELETE
NAME	KREIKEMEIER, KRAIG G.	
STREET ADDRESS	80 WEBSTER WOODS	
CITY - ST - ZIP	ST LOUIS MO	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	DIRECTOR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	R.E. BEUMER	
1.3 STREET ADDRESS	13013 WHEATFIELD FARM RD	
1.4 CITY - ST - ZIP	TOWN & COUNTRY, MO 63141	
2.1 TITLE	SECRETARY	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	TERRY J. GALGANSKI	
2.3 STREET ADDRESS	411 RUSTIC VALLEY CT.	
2.4 CITY - ST - ZIP	BALLWIN, MO 63021	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Terry J. Galganski* 7 JAN. 1997 314-770-4770
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034 (9/96)