

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2006 08:00 A
Secretary of State

DOCUMENT # P95000084500

1. Entity Name
BOSSO-IMHOF ENVIRONMENTAL SERVICES, INC.



Principal Place of Business
**1300 W. GOVERNMENT ST
 PENSACOLA, FL 32501**

Mailing Address
**1300 W. GOVERNMENT ST
 PENSACOLA, FL 32501**



01192006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number **59-3347205** Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**BOSSO, TERENCE C
 1300 W. GOVERNMENT ST
 PENSACOLA, FL 32501**

**DO NOT WRITE
 IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

1000000402108
 02/02/06-80373-006 150.00

10. OFFICERS AND DIRECTORS

TITLE **D**
 NAME **BOSSO, TERENCE C**
 STREET ADDRESS **3222 SAMANTHA DR**
 CITY-ST-ZIP **CANTONMENT, FL 32533**

TITLE **D**
 NAME **IMHOF, PATRICK JR.**
 STREET ADDRESS **1170 ELLISON DR**
 CITY-ST-ZIP **PENSACOLA, FL 32503**

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 CITY-ST-ZIP

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *T. Christopher Bossso*

T. CHRISTOPHER BOSSO 1/16/06 850-434-1935

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #