

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

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PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **S85842 (0)**

1. Corporation Name

**ENVIRO-COMP SERVICES, INC.**



Principal Place of Business

Mailing Address

~~0/0 KENT RIDGE & CRAWFORD~~  
225 WATER ST. STE 900  
JACKSONVILLE FL 32202  
US

~~0/0 KENT RIDGE & CRAWFORD~~  
225 WATER ST. STE 900  
JACKSONVILLE FL 32202  
US

3. Date Incorporated or Qualified  
**10/08/1991**

3a. Date of Last Report  
**05/01/1995**

2. Principal Place of Business

2a. Mailing Address

21 **218 MORGAN AVE**

26 **218 MORGAN AVE**

4. FEI Number  
**59-3097717**

Applied For  
Not Applicable

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

23 City & State

28 City & State

**JACKSONVILLE FL**

**JACKSONVILLE FL**

6. Election Campaign Financing Trust Fund Contribution

**\$5.00** May Be Added to Fees

24 Zip **32254**

25 Country **US**

29 Zip **32254**

30 Country **US**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**RIDGE, GEORGE E**  
225 WATER ST.  
STE 900  
JACKSONVILLE FL 32202

81 Name **MICHAEL A. WODRICH**  
82 Street Address (P.O. Box Number is Not Acceptable)  
**1301 RIVERPLACE BLVD**  
83 **SUITE 1500**  
84 City **JACKSONVILLE** FL 85 Zip Code **32207**

11. Pursuant to the provisions of Sections 607.0012 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

*[Handwritten Signature]*

**4/29/96**

Signature type or printed name of agent, if not agent, is not applicable. (NOTE: Registered Agent's signature is required when registering.)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	<b>DP</b>	<input type="checkbox"/> DELETE
NAME	<b>CRAWFORD, FELIX A</b>	
STREET ADDRESS	<b>3841 FEATHER OAKS DR. E.</b>	
CITY-ST-ZIP	<b>JACKSONVILLE FL</b>	
TITLE	<b>V</b>	<input type="checkbox"/> DELETE
NAME	<b>FRAZIER, FRANK</b>	
STREET ADDRESS	<b>2728 CEDARCREST DR.</b>	
CITY-ST-ZIP	<b>ORANGE PARK FL</b>	
TITLE	<b>ST</b>	<input checked="" type="checkbox"/> DELETE
NAME	<b>MCCRIMON, MARY C</b>	
STREET ADDRESS	<b>1849 OCEAN GROVE DR.</b>	
CITY-ST-ZIP	<b>ATLANTIC BEACH FL</b>	
TITLE	<b>V</b>	<input checked="" type="checkbox"/> DELETE
NAME	<b>HARRISON, ALAN B</b>	
STREET ADDRESS	<b>2859 SCOTT MILL ESTATES</b>	
CITY-ST-ZIP	<b>JACKSONVILLE FL</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.0713(k), 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:

*[Handwritten Signature]*

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/29/96**

**904-384-2567**

DATE

DISPATCH NUMBER

CR2E034 (12/95)

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ATTACHMENT TO PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # S85842

ENVIRO-COMP SERVICES, INC.

59-3097717

Line 13. Additions/Changes to Officers and Directors in 12

1.1 Title	D/V	Change	X	Addition
1.2 Name	HARRIS W. HUDSON			
1.3 Street Address	200 EAST LAS OLAS BLVD.			
1.4 City-Zip-State	FT. LAUDERDALE FL. 33301			
1.1 Title	V/S	Change	X	Addition
1.2 Name	RICHARD L. HANDLEY			
1.3 Street Address	200 EAST LAS OLAS BLVD.			
1.4 City-Zip-State	FT. LAUDERDALE FL. 33301			
1.1 Title	V	Change	X	Addition
1.2 Name	ROBERT GUERIN			
1.3 Street Address	200 EAST LAS OLAS BLVD.			
1.4 City-Zip-State	FT. LAUDERDALE FL. 33301			
1.1 Title	V	Change	X	Addition
1.2 Name	DONALD KOOGLER			
1.3 Street Address	200 EAST LAS OLAS BLVD.			
1.4 City-Zip-State	FT. LAUDERDALE FL. 33301			
1.1 Title	V	Change	X	Addition
1.2 Name	JAMES ARNOLD			
1.3 Street Address	218 MORGAN AVE			
1.4 City-Zip-State	JACKSONVILLE, FL 32254			
1.1 Title	T	Change	X	Addition
1.2 Name	COURTLAND PEDDY			
1.3 Street Address	200 EAST LAS OLAS BLVD.			
1.4 City-Zip-State	FT. LAUDERDALE FL. 33301			
1.1 Title		Change		Addition
1.2 Name				
1.3 Street Address				
1.4 City-Zip-State				
1.1 Title		Change		Addition
1.2 Name				
1.3 Street Address				
1.4 City-Zip-State				