|                                                                              | NUE S<br>SBURG, FL 33707                                                                                                                                          |                                   |                                           |                    |
|------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|-------------------------------------------|--------------------|
| Current Ma                                                                   | iling Address:                                                                                                                                                    |                                   |                                           |                    |
| 5315 1ST A<br>SAINT PETI                                                     | VENUE S<br>ERSBURG, FL 33707 US                                                                                                                                   |                                   |                                           |                    |
| FEI Number: 83-2854874                                                       |                                                                                                                                                                   | Certificate of Status Desired: No |                                           |                    |
| Name and A                                                                   | Address of Current Registered Agent:                                                                                                                              |                                   |                                           |                    |
| ORSINI, SCOT<br>5315 1ST AVE<br>SAINT PETER                                  |                                                                                                                                                                   |                                   |                                           |                    |
| The above name                                                               | d entity submits this statement for the purpose of changing its reg                                                                                               | istered office or regis           | tered agent, or both, in the State of Flo | orida.             |
|                                                                              |                                                                                                                                                                   |                                   |                                           |                    |
| SIGNATURI                                                                    | E: SCOTT ORSINI                                                                                                                                                   |                                   |                                           | 06/30/2020         |
| SIGNATURI                                                                    | E: SCOTT ORSINI<br>Electronic Signature of Registered Agent                                                                                                       |                                   |                                           | 06/30/2020<br>Date |
|                                                                              |                                                                                                                                                                   |                                   |                                           |                    |
|                                                                              | Electronic Signature of Registered Agent                                                                                                                          | Title                             | VP                                        |                    |
| Officer/Dire                                                                 | Electronic Signature of Registered Agent                                                                                                                          | Title<br>Name                     | VP<br>GIBSON, TERRY                       |                    |
| <b>Officer/Dire</b><br>Title                                                 | Electronic Signature of Registered Agent<br>ctor Detail :<br>P                                                                                                    |                                   |                                           |                    |
| <b>Officer/Dire</b><br>Title<br>Name<br>Address                              | Electronic Signature of Registered Agent<br>ctor Detail :<br>P<br>SHULER, BRANDON                                                                                 | Name<br>Address                   | GIBSON, TERRY                             |                    |
| <b>Officer/Dire</b><br>Title<br>Name<br>Address<br>City-State-Zip:           | Electronic Signature of Registered Agent<br>ctor Detail :<br>P<br>SHULER, BRANDON<br>5315 FIRST AVENUE SOUTH<br>ST. PETERSBURG FL 33707                           | Name<br>Address                   | GIBSON, TERRY<br>5315 FIRST AVENUE SOUTH  |                    |
| Officer/Dire<br>Title<br>Name<br>Address<br>City-State-Zip:<br>Title         | Electronic Signature of Registered Agent<br>ctor Detail :<br>P<br>SHULER, BRANDON<br>5315 FIRST AVENUE SOUTH<br>ST. PETERSBURG FL 33707<br>G C                    | Name<br>Address                   | GIBSON, TERRY<br>5315 FIRST AVENUE SOUTH  |                    |
| Officer/Dire<br>Title<br>Name<br>Address<br>City-State-Zip:<br>Title<br>Name | Electronic Signature of Registered Agent<br>ctor Detail :<br>P<br>SHULER, BRANDON<br>5315 FIRST AVENUE SOUTH<br>ST. PETERSBURG FL 33707<br>G C<br>ORSINI, SCOTT T | Name<br>Address                   | GIBSON, TERRY<br>5315 FIRST AVENUE SOUTH  |                    |
| Officer/Dire                                                                 | Electronic Signature of Registered Agent<br>ctor Detail :<br>P<br>SHULER, BRANDON<br>5315 FIRST AVENUE SOUTH<br>ST. PETERSBURG FL 33707<br>G C                    | Name<br>Address                   | GIBSON, TERRY<br>5315 FIRST AVENUE SOUTH  |                    |

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BRANDON D. SHULER

Electronic Signature of Signing Officer/Director Detail

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT FILED Jun 30, 2020

**Secretary of State** 

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## DOCUMENT# N18000013047

Entity Name: FEDERATION FOR ADVANCED SEWAGE TREATMENT, INCORPORATED

**Current Principal Place of Business:** 

5315 19T AVENUE 9

Date