2000 UNIFORM BUSINESS REPORT (UBR)

FILED **DOCUMENT # 539830** Apr 13, 2000 8:00 am Secretary of State ENVIRONMENTAL AFFAIRS CONSULTANTS, INC. 04-13-2000 90118 018 ***150.00 Mailing Address Principal Place of Business 429 10TH AVE W PO BOX 337 PALMETTO FL 34220-0337 STE B PALMETTO FL 34221 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-1767233 Not Applicable Zip Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7.-Name and Address of New Registered Agent. Name MONTIN, GARY J Street Address (P.O. Box Number is Not Acceptable) 4111 5TH AVE W. PALMETTO FL 34221 Zip Code FL 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. 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 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. PTD ☐ Change ☐ Addition ☐ Delete TITLE MONTIN, GARY J NAME NAME STREET ADDRESS STREET ADDRESS 4111 5TH AVE W. CITY-ST-ZIP CITY-ST-ZIP PALMETTO FL Change ☐ Addition TITLE ☐ Delete TITLE NAME MONTIN. ANNE E NAME STREET ADDRESS 4111 5TH AVE W. STREET ADDRESS CITY-ST-ZIP_ : CITY-ST-ZIP = PALMETTO FL ☐ Addition ☐ Delete TITLE BURTON, MICHAEL AG BURTON, MICHAEL A G NAME NAME 25TH Are W. 721 15TH AVE 806 25TH AUE W. STREET ADDRESS STREET ADDRESS 34221 PA LMETTO CITY-ST-ZIP CITY-ST-ZIP PALMETTO FL 34221 Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change ☐ Addition TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I 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 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 11 or Block 12 if

SIGNATURE: MICHAEL TOURTON 4/10/00 941 722-036

changed, or on an attachment with an address, with all other like empowered.