

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 633920

1. Entity Name

ENVIROSAFE TECHNOLOGIES, INC.

Principal Place of Business

~~ST. JOHNS INDL.~~
~~PKWY. WEST~~
JACKSONVILLE FL 32246
US

Mailing Address

~~ST. JOHNS INDL.~~
~~PKWY. WEST~~
JACKSONVILLE FL 32246
US

2. Principal Place of Business

11201 ST. JAMES INDL PKWY. (same)

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-1931920

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

JOYCE, DENNIS G
1998 OCEANFRONT ST
NEPTUNE BEACH FL 32266

7. Name and Address of New Registered Agent

Name

James V. Walker

Street Address (P.O. Box Number is Not Acceptable)

217 Ponte Vedra Park Drive

Suite 200

City

Ponte Vedra Beach

FL

Zip Code
32082

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

James V. Walker

MAR 19 2001

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)



FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

PSD
JOYCE, DENNIS
1998 OCEANFRONT ST.
NEPTUNE BEACH FL 32266

☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TV
JOYCE, DANES
1998 OCEANFRONT ST.
NEPTUNE BEACH FL 32266

☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP

V
JOYCE, FRANKLIN B
1998 OCEANFRONT ST.
NEPTUNE BEACH FL 32266

☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ Change ☐ Addition

TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ Change ☐ Addition

TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ Change ☐ Addition

TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ Change ☐ Addition

TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ Change ☐ Addition

TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ Change ☐ Addition

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

SIGNATURE:

Dennis G. Joyce
DENNIS G. JOYCE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3/14/01

Daytime Phone #

904-6463456

CR2E034 (10/00)

0020691