

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766202

FILED  
Feb 25, 2009  
Secretary of State

**Entity Name:** FLORIDA ENVIRONMENTAL INSTITUTE, INC.

**Current Principal Place of Business:**

122 RANCH ROAD  
P.O. BOX 406  
VENICE, FL 339600406

**New Principal Place of Business:**

122 RANCH ROAD  
VENUS, FL 33960

**Current Mailing Address:**

5915 BENJAMIN CENTER DR.  
TAMPA, FL 33634

**New Mailing Address:**

**FEI Number:** 59-2218777

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SMITH, HULSEY  
225 WATER STREET  
SUITE 1800  
JACKSONVILLE, FL 32202 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: STANDER, O. B.  
Address: 5915 BENJAMIN CENTER DRIVE  
City-St-Zip: TAMPA, FL 33634

Title: P ( ) Delete  
Name: GLADSTONE, WILLIAM E HON  
Address: 326 PALM TRAIL  
City-St-Zip: DELRAY BEACH, FL 33483

Title: D ( ) Delete  
Name: GULKIS, NORMAN  
Address: 2522 PRETTY BAYOU ISLAND DR  
City-St-Zip: PANAMA CITY, FL 32405

Title: D ( ) Delete  
Name: ORLANDO, FRANK  
Address: 3305 COLLEGE AVE.  
City-St-Zip: FORT LAUDERDALE, FL 33314

Title: C ( ) Delete  
Name: JENSEN, DARRELL  
Address: 48 LAKE HENRY DR.  
City-St-Zip: LAKE PLACID, FL 33852

Title: D ( ) Delete  
Name: MYERS, WILLIAM  
Address: 1365 ALEGRIANO AVE  
City-St-Zip: CORAL GABLES, FL 33146

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: O.B. STANDER

D

02/25/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date