## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT **CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Socretary of State **DIVISION OF CORPORATIONS** 

**DOCUMENT** # 769486

(2)

THE NATIONAL ENVIRONMENTAL-TECHNOLOGY TRAINING !

NSTITUTE, INC.

**FILED** May 14 1997 8:00am Secretary of State



гинскрантас І	e of pusifiess	walling /	Address								
8217 N.W. 18TH GAINESVILLE FI		6217 N.W. 18TH AVENUE GAIMESVILLE FL 32605-3205								•	
:							3. Date Incorporated or 07/20/1983	Qualified	3a. Date	of Last F 5/19/19	Report <b>36</b>
_ `	Place of Business	28. Mailing Address					4. FEI Number		ч	T A	pplied For
21		26				59-2517068			Not Applicable		
Sulte, Apt.		Suite 27	Suite, Apt. #, etc.				5. Certificate of Status D	esired	S8.75 Additional Fee Required		
City & Stat	le	City	& State				6. Election Campaign Fi	nancing		\$5.00	May Be
23		28	<del></del>				Trust Fund Contribution	n	Added to Fees		
Zip	Country	Zip		Cour	ntry		8. This corporation has I	ability for i	ntangible t	ax under s	. 199.032,
24	25	29		30			Florida Statutes		Yes 🗆		
<del></del>	9. Name and Address of Currer	nt Hegistered	Agent		~-		10. Name and Address	of New Reg	pistered A	gent	,
B444450	DIALLED D. AD				81	Name					
	, RICHARD D., SR.		82 Street Ar			Street Add	ress (P.O. Box Number is No	Acceptab	le)		
	/ 18TH AVENUE		83								
GAINESV	/ILLE FL 32605										
					84	City				<b>85</b> Zip	Code
						******			FL_	'	
office or r	to the provisions of Sections 617.050 registered agent, or both, in the State am familiar with, and accept the oblig	of Florida, Su alions of, Sect	ich change was lion 617.0503, Fl	authorized Iorida Statu	by I by	rthe corpora i.	tion's board of directors. I her	eby accep	urpose or c	nanging Intment as	ts registered registered
SIGNATURE	Signature, typed or printed name of registered agr										hade Milyanows (say a series a series or one)
12.	OFFICERS AN			13.	Age	nt signature requi	red when reinstating) ADDITIONS/CHANGES	TO OFFICE	DATE EDC AND I	DIBECTO	DC IN 40
TITLE	PD	D DITLOTOTIC	DELETE	1.1 100	I F		ADDITIONO/GIANGE	10 01110		Change	Addition
NAME	PALMER, RICHARD D.	•		1.2 NA							L. Addition
STREET ADDRESS	6217 NW 18TH AVENUE			1		ADDRESS					
CITY-ST-ZIP	GAINESVILLE FL			1.4 CIT							
TITLE	D		DELETE	21 100	•••••	1- £11				Change	Addition
NAME	PALMER, SARA W.			2.2 NA					-		
STREET ADDRESS	6217 NW 18TH AVENUE					ADDRESS					
CITY-ST-ZIP	GAINESVILLE FL			2.4 CII							
TITLE	D		DELETE	3.1 1111		11-211	<del> </del>	· · · · ·	г	Change	Addition
NAME	PALMER, RICHARD D., JR.			3.2 NA		- 1			-		
STREET ADDRESS	6217 NW 18TH AVENUE			I		ADDRESS					
CITY-ST-ZIP	GAINESVILLE FL			3.4 CH							
TITLE			DELETE	4.1 TITE						Change	Addition
NAME				4. 2 NA	ME				_	•	
STREET ADDRESS				4.3 STR	REET.	ADDRESS					
CITY-ST-ZIP	<u>{</u>			4.4 CIT		J					
TITLE			DELETE	5.1 1(1)						Change	Addition
NAME				5.2 NA	ME					-	
STREET ADDRESS				5.3 STR	REET	ADDRESS					
CITY-ST-ZIP				5.4 CIT							
TITLE			DELETE	6.1 TITI	_					Change	Addition
NAME				6.2 NAI	ME	]					
STREET ADDRESS				6.3 STR	REET	ADDRESS					
CITY-ST-ZIP				6.4 CIT	Y - ST	1.7IP					

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

Richard D. Palmer, Sr. Richard & Children

4129197 352-331-501207