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Mar 10 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 835117 (3)

1. Corporation Name
ENV SERVICES, INC.



Principal Place of Business
1016 W 8TH AVE
KING OF PRUSSIA PA 19406
US

Mailing Address
1016 W 8TH AVE
KING OF PRUSSIA PA 19406-1314
US

3. Date Incorporated or Qualified 10/01/1975
3a. Date of Last Report 02/01/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

35-1406595

Applied For

Not Applicable

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

22 City & State

27 City & State

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

23 Zip

Country

28 Zip

Country

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

24

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29

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

81 Name

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

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P
NAME STEVER, ROBERT
STREET ADDRESS 1016 W. 8TH AVE.
CITY-ST-ZIP KING OF PRUSSIA PA
DELETE ☐

1.1 TITLE Director
1.2 NAME William Cook
1.3 STREET ADDRESS 1400 West 94th St
1.4 CITY-ST-ZIP Minneapolis MN 55440
Change ☐ Addition ☒

TITLE S
NAME VJDOVRIK, RAYMOND
STREET ADDRESS 1400 W 94TH ST
CITY-ST-ZIP MINNEAPOLIS MN
DELETE ☒

2.1 TITLE Secretary
2.2 NAME Norman C. Linnell
2.3 STREET ADDRESS 1400 W 94th St
2.4 CITY-ST-ZIP Minneapolis MN 55440
Change ☐ Addition ☒

TITLE T
NAME BOYLAN, BARBARA
STREET ADDRESS 1016 W 94TH ST
CITY-ST-ZIP KING OF PRUSSIA PA
DELETE ☐

3.1 TITLE Director
3.2 NAME Norman C. Linnell
3.3 STREET ADDRESS 1400 West 94th St
3.4 CITY-ST-ZIP Minneapolis MN 55440
Change ☐ Addition ☒

TITLE D
NAME DAY, HERBERT
STREET ADDRESS 1400 W 94TH ST
CITY-ST-ZIP MINNEAPOLIS MN
DELETE ☒

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
Change ☐ Addition ☐

TITLE DO
NAME PHILLIPS, DAVE
STREET ADDRESS 1016 W 8 TH AVE
CITY-ST-ZIP KING OF PRUSSIA PA
DELETE ☐

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
Change ☐ Addition ☐

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DELETE ☐

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
Change ☐ Addition ☐

14. I do 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Barbara Boylan
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/28/97 (610) 337-8222
Date Daytime Phone

0008218

CR2E034 (9/96)