

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 15, 2005 08:00 AM
Secretary of State

DOCUMENT # F00000001598

1. Entity Name
**ENVIRONMENTAL SCIENCE ASSOCIATES
CORPORATION**



Principal Place of Business
**225 BUSH STREET, STE 1700
SAN FRANCISCO, CA 94104**

Mailing Address
**225 BUSH STREET, STE 1700
SAN FRANCISCO, CA 94104**



07012005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
94-1698350

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**ALBERTS, RICHARD D
2685 ULMERTON RD, STE 102
CLEARWATER, FL 33762**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

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
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE PD
NAME OATES, GARY W
STREET ADDRESS 225 BUSH STREET, STE 1700
CITY-ST-ZIP SAN FRANCISCO, CA 94104

TITLE D
NAME ALLEE, DEBRA
STREET ADDRESS 225 BUSH STREET, STE 1700
CITY-ST-ZIP SAN FRANCISCO, CA 94104

TITLE D
NAME ALBERTS, RICHARD
STREET ADDRESS 2685 ULMERTON ROAD # 102
CITY-ST-ZIP CLEARWATER, FL 33762

TITLE D
NAME LYNN, CAROLE K
STREET ADDRESS 225 BUSH STREET, STE 1700
CITY-ST-ZIP SAN FRANCISCO, CA 94104

TITLE D
NAME MOULTON, LESLIE
STREET ADDRESS 225 BUSH STREET STE 1700
CITY-ST-ZIP SAN FRANCISCO, CA 94104

TITLE CFO
NAME THORTON, GREGORY A
STREET ADDRESS 225 BUSH STREET STE 1700
CITY-ST-ZIP SAN FRANCISCO, CA 94104

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08/15/05-80004-013 158.75

**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/3/05

Date

415 896-5900

Daytime Phone #