

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2008 08:00 AM
Secretary of State

DOCUMENT # F02000002025

1. Entity Name
GROUNDWATER AND ENVIRONMENTAL SERVICES, INC.



Principal Place of Business

**4400 CREAMERY WAY
SUITE 500 - LEGAL DEPT.
EXTON, PA 19341-2577**

Mailing Address

**4400 CREAMERY WAY
SUITE 500 - LEGAL DEPT.
EXTON, PA 19341-2577**



01072008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
23-2335424

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION, FL 33324**

**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
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO KULL, ANTHONY A 1340 CAMPUS PARKWAY NEPTUNE, NJ 07753
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MYERS, BARRY L 410 EAGLEVIEW BLVD STE 100 EXTON, PA 19341
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P VAN WOUTENBERG, EDWARD 1340 CAMPUS PARKWAY NEPTUNE, NJ 07753
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO LEMON, MICHAEL F 410 EAGLEVIEW BLVD., STE. 100 EXTON, PA 19341
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WHISMAN, CHARLES 410 EAGLEVIEW BLVD., STE 100 EXTON, PA 19341
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WHISMAN, CHARLES III 410 EAGLEVIEW BLVD STE 100 EXTON, PA 19341

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01/16/08-80003-021 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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

Michael Lemon

Michael Lemon, CFO - 1-7-08